L23000009476

(Requestor's Name)
(in quantity
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200400667612

01/38/23--01010--018 **25.00



COVER LETTER

TO: Registration Se			
	SS STEPS LLC		
SUBJECT:	Name of Lire	aited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MARIA RAMIREZ		
		Name of Person	-
	SAWGRASS STEPS LLC		
	•	Firm Company	-
	1811 E COOPER DR		7P23 SCI
		Address	
	DELTONA FL 33725		- 5
		City/State and Zip Code	
	MDEMULTISERVICES@	•	E, t
	E-mail address: (to be used for future annual report notification)	
For further information c	oncerning this matter, please c	all:	₹>
MARIA RAMIREZ		954 4796576	
Name o	d Person	Area Code Daytime Telephone Number	 I
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	radditional copy is enclosed) Certified	ite of Status &
Hailing Address Registration S Division of C	Section Torporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
P.O. Box 632 Tallahassee.		2415 N. Monroe Street, Suite 8	810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAWGRASS STEPS ELC		
(<u>Name of the Limited Llability Compa</u> (A Florida Limited l	i <mark>ny as it now appears on our record</mark> Liability Company)	<u>(8.</u>)
The Articles of Organization for this Limited Liability Company Torida document number <u>L23000009476</u> .	were filed on $\frac{01/4/2023}{}$	and assigned
This amendment is submitted to amend the following:		
A. If antending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	T' or the abbreviation "L.E.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		7723 1341
		= = = = = = = = = = = = = = = = = = = =
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
,	Enter Florida street addres	rç
	, F)	orida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MARIA MORENO	1811 E COOPER DR	≡ Add
		DELTONA FL 33725	□Remove
			□ Change
AMBR	MARIA RAMIREZ	1811 E COOPER DR	□Add
		DELTONA BEACH FL 33725	Œ Remove
			
			□Add
			AC CRemove
			□ Ghang ę □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
			☐Remove
			U Remove
			□Add
			□ Remove
			□ Change

	
	
1///2022	
If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 Note: If the date inserted in this block does not meet the applicable statutory filing requirem	(optional) days after filing.) Pursuant to 605 0207 ents, this date will not be listed as
Effective date, if other than the date of filing: It an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90. Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12(0) a.m. on the earl	days after filing.) Pursuant to 605 0207 tents, this date will not be listed as ier of: (b) The 90th day after the
Effective date, if other than the date of filing: It'an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90. Note: If the date inserted in this block does not meet the applicable statutory filing requirem document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlied is filed.	days after filing.) Pursuam to 605 0207 tents, this date will not be listed as ter of: (b) The 90th day after the
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 Note: If the date inserted in this block does not meet the applicable statutory filing requirems document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier distilled. Dated O1/25/2023 Dated O1/25/2023 Signature of a member or authorized representative of a member of authorized representative	days after filing.) Pursuam to 605 0207 tents, this date will not be listed as ter of: (b) The 90th day after the

Filing Fee: \$25.00

Typed or printed name of signee