

L23000030278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Request Granted LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kendra Brown  
Name of Person

Request Granted LLC  
Firm/Company

2210 SE HIGHWAY 41  
Address

MORRISTON Florida 32668  
City/State and Zip Code

BrownKendra03@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Correction-BROWN Kendra 03@gmail.com

Kendra Brown at (352) 441-5932  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee    ☐ \$30.00 Filing Fee & Certificate of Status    ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☒ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Request Granted LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 1-17-23 and assigned  
Florida document number L23000030278

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2210 SE HIGHWAY 41  
MORRISTON, FLORIDA  
32668

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2210 SE HIGHWAY 41  
MORRISTON, FLORIDA  
32668

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Sean L. Brown Jr

New Registered Office Address:

2210 SE HIGHWAY 41

Enter Florida street address

MORRISTON

City

Florida

FL 32668

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.

Sean L Brown Jr.

If Changing Registered Agent, Signature of New Registered Agent

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CLERK OF COURT  
TALLAHASSEE, FLORIDA

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The email Address on Cover letter is

BrownKendra03@gmail.com

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90<sup>th</sup> day after the record is filed.

Dated

6-5-23

Kendra Brown

Signature of a member or authorized representative of a member

Kendra Brown

Typed or printed name of signee

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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