# L23000032448

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(Address)
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(City/State/Zip/Phone #)
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## **COVER LETTER**

**Registration Section** 

Tallahassee, FL 32314

TO:

Div	rision of Cor	porations		
eun wer.	Kristin A K	Kalley, CPA LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	i all correspo	ondence concerning this matter	to the following:	
		Kristin A Castello		
			Name of Person	
		<del></del>	Firm/Company	
		544 St. Dunstan Way		
		Winter Park, FL 32792	Address	
			City/State and Zip Code	
		kristincastello@gmail.com	City/state and 75tp Code	
		E-mail address; (	to be used for future annual repu	ort notification)
For further in	nformation c	concerning this matter, please ex	ıll:	
Kristin A Ca	astello		407 920-21	167
	Name o	rl Person	at () Area Code	Daytime Telephone Number
Enclosed is a	a check for th	he following amount:		
□ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclose	Certificate of Status &
	iling Addres		Street Addr. Registratie	
	-	Corporations		f Corporations
P.C	D. Box 632	.7		e of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(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 L. Florida document number 1.23000032448		were filed on $\frac{01/18/20}{}$	and assigned	
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited <u>liab</u>	oility company here:		
Kristin A Castello, CPA LLC				
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designa	tion "LLC" or the abbreviation "L.L.C."	-
Enter new principal offices address, if applic	:able:			
(Principal office address MUST BE A STREE	ET ADDRESS)			_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	544 St. Dunstan Way Winter Park, FL 3279		<del>-</del> -
B. If amending the registered agent and/or in agent and/or the new registered office addre		address on our record	ls, enter the name of the new regist	<u>ered</u>
Name of New Registered Agent:	Kristin A Caste	ello		_
New Registered Office Address:	544 St. Dunstar	n Way  Enter Florida str	esat address	_
	Winter Park	12000 1 107 000 507	Florida <sup>32792</sup>	
		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.

MYTV ('ASTULO
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
			□Remove
			□Change
			□Remove
			□Change
			□Add
			[]Remove
			□Add
			□Remove
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Effective date, if other than the office (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and cannot be prior ock does not meet the applica	ible statutory filing require	(optional) 90 days after filing.) Pursuant to 6 ements, this date will not be li	05,0207 (3) isted as the
he record specifies a delayed effective ord is filed.	date, but not an effective tir	me, at 12:01 a.m. on the ec	urlier of: (b) The 90th day af	îter the
Dated December 18	2023			
Krystin	Castulo Signature of a member or autho			
	Signature of a member or author	rized representative of a men	iber	
	•			

Filing Fee: \$25.00

# **COVER LETTER**

TO: Registration Section

Division of Cor	porations		
Kristin A K	alley, CPA LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kristin A Castello		
		Name of Person	
		Finn/Company	<del></del>
	5440 10 111		
	544 St. Dunstan Way		
	Finn/Company  544 St. Dunstan Way  Address  Winter Park, FL 32792		
	Winter Park, FL 32792		
		City/State and Zip Code	
	kristincastello@gmail.com		
	E-mail address: (	to be used for future annual report not	ification)
For further information of	oncerning this matter, please c	all:	
Kristin A Castello		407 920-2167	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
		•	
Enclosed is a check for the	za fallowina amount:		
	_		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	号 \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Streat Addresses	
Registration S		<u>Street Address:</u> Registration Se	ection
Division of C	Corporations	Division of Co	rporations
P.O. Box 632		The Centre of	
Tallahassee, 1	rL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



### KRISTIN A KALLEY, CPA 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 I	Liability Company	y were filed on 01/18/	2023 and assigned
Florida document number L23000032448			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited lial	pility company here:	
Kristin A Castello, CPA LLC			
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:		544 St. Dunstan Wa	<u> </u>
(Mailing address MAY BE A POST OFFICE	E BOX)	Winter Park, FL 32	792
B. If amending the registered agent and/or	registered office	address on our reco	rds enter the name of the new registered
agent and/or the new registered office addre	ess here:		dis, enter the name of the new registered
Name of New Registered Agent:	Kristin A Casto	ello	
New Registered Office Address:	544 St. Dunsta	n Way	
		Enter Florida	street address
	Winter Park		, Florida 32792
		Ciŋ·	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
	<del></del>		□Add
			□Remove
			□ Change
			□ Add
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<u> </u>					
Effective date, if other tha (If an effective date is listed, the da Note: If the date inserted in the document's effective date on	te must be specific and his block does not r	d cannot be prior to meet the applicab	date of filing or more le statutory filing re	(optiona than 90 days after filir quirements, this da	g ) Pursuant to 605 0207
he record specifies a delayed el ord is filed.	fective date, but not	t an effective time	e, at 12:01 a.m. on t	he earlier of: (b)	The 90th day after the
Dated	<del></del>	, 2023			
Dated December 18	n Caste	,			

. . . .

Filing Fee: \$25.00