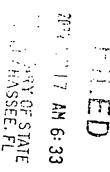
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800431536448

06/17/24--01028--008 ++30.00



Cil/7/21/

COVER LETTER

	tegistration Se Division of Cor						
eun ir ca	Space Yoga	ı LLC					
SUBJECT	ı:	Name of Lim	ited Liability Compan	y		_	
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.				
		ondence concerning this matter	_				
		Caroline Berkey					
		<u></u>	Name of Perso	n			
		Balanced Flow					
			Firm/Company	··			
		31 Cypress Dr					
			Address			_	
		Palm Harbor, FL 34684				:	ي
		-	City/State and Zip	Code		-	:
		halancedflowcaro@gmail.c	:om				1
		E-mail address: (to be used for future a	nnual report notitie	ration)	17 1337	· · · · · ·
For further	r information c	oncerning this matter, please c	all:			SEE'S	1
Caroline I	Berkey		727	510-8180	i	6: 33	الربيا
	Name o	f Person	at (Area Code	2 Daytime	Felephone Num	her	
Enclosed i	s a check for th	ne following amount:					••
□ \$25.00	0 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Certified Co radditional copy	ру	Certif Certif	Filing Fee, icate of Statu ied Copy onal copy is enclosed.	
F	dailing Addres Registration 5	Section		eet Address: gistration Sect	ion		
Division of Corporations				vision of Corpo			
	P.O. Box 632 'allahassee, l			e Centre of Ta 15 N. Monroe		2 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Space Toga LLC				
(<u>Name of the Limited Liability Con</u> (A Florida Limite	ipany as it now appears on our records ed Liability Company)	<u>.</u>)		
The Articles of Organization for this Limited Liability Comparation document number <u>L23000034303</u> .	ny were filed on 1-18-2023		and	l assigned
his amendment is submitted to amend the following:				
a. If amending name, enter the new name of the limited li	ability company here:			
Balanced Flow LLC				
he new name must be distinguishable and contain the words "Limited Li-	ability Company." the designation "LLC"	or the abb	previatio	n "L.L.C."
Inter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)				
		_	7.3	
nter new mailing address, if applicable:		: ·		
Mailing address MAY BE A POST OFFICE BOX)		23		
Adding dadress may be a post of fice boxy		25 -<	~	
		<u> </u>	<u>-1-</u>	111
. If amending the registered agent and/or registered offic	on address on our records outer	المعالمة الما يما	O COL	Tour rogiete
ent and/or the new registered office address here:	te address on our records, enter	ine name	ည်း	new registe
				٠
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	Flo	rida	•	
	City		Zip C	ode

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	Calvin Doyle	31 Cypress Dr	≣ Add
		Palm Harbor, FL 34684	□Remove
			□ Change
			□Remove
			□Change
			□ Add
			□Remove
			☐ Change
			DAdd DAdd
			SHOW AH Change
			□Remove
			Change
			□Add
			□Remove
			□Change

Page 2 of 3

								
		-						
			-					
							24	
						60) 100 100 100 100		
		_ / "				IAR AHA		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
						SSE/		T:
<u></u>					. .		AM 6:	
						<u> </u>	رب	
						111	ယ	
fective date, if other than the dat in effective date is listed, the date must be : ote: If the date inserted in this block ocument's effective date on the Depar	specific and does not m	cannot be prio eet the appli	cable stati	filing or more		s after tiling.)		
record specifies a delayed ef The 90th day after the record		ate, but n	ot an eff	ective tin	ne, at 12:	01 a.m. (on the	earlier
ited June 10		2024						
$\mathcal{L}_{\mathcal{L}}}}}}}}}}$	<u> </u>	leo	······································					
[Wolke]	3274	nember or aut	· · · · · · · · · · · · · · · · · · ·					

Page 3 of 3