

L23 0000 57410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

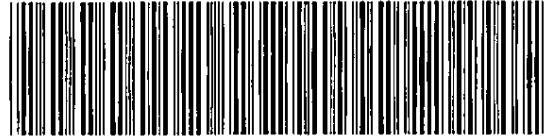
(Business Entity Name)

(Document Number)

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02/21/24 -01008--012 **25.00

FILED
2024 FEB 21 PM 4:12
SECRETARY OF STATE
TALLAHASSEE FL

Count on Me AP, LLC

800 East Camino, Real #314

Boca Raton, FL 33432

Ph: (561) 317-6419

Division of Corporations

PO. Box 6327

Tallahassee, FL 32314

Dear Sir or Madam,

Enclosed are documents to change the name of the LLC from Count on Me AP, LLC to LPWM, LLC

Sincerely,

Chris A. Wittusen

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Count on Me AP LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Greene

Name of Person

Count on Me AP LLC

Firm/Company

800 E. Camino Real, #314

Address

Boca Raton, FL 33432

City/State and Zip Code

lisagreene1@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chris Wittusen

561
at ()

317-6419

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**

Count On Me AP 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 01/31/2023 and assigned Florida document number L23000057460.

This amendment is submitted to amend the following:

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

LPWM, LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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2024 FEB 21 PM 4:12
CLERK OF CIRCUIT COURT
JACKSONVILLE, FL

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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

This image shows a single page from a notebook or ledger. It features ten evenly spaced, thin black horizontal lines running across its width. The background is plain white, and there are no margins, text, or other markings present.

(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)

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

2/12 _____, 2024

 Signature of a member or authorized representative

Typed or printed name of signee

Filing Fee: \$25.00