

L23000075497

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

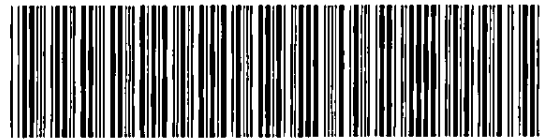
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wmills

Office Use Only



700424901397

03/05/24--01005--018 **55.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Amyria Vending 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:

Amanda Hammond
Name of Person

Amyria Vending LLC
Firm/Company

13364 Beach Blvd #926
Address

Jacksonville FL 32224
City/State and Zip Code

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

For further information concerning this matter, please call:

Amanda Hammond at (804) 305-9281
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Amyria Vending 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 02/10/2023 and assigned Florida document number L23000075497

This amendment is submitted to amend the following: name change; ein update, RA update, member update

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

Amy Empowered 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)

12220 Atlantic Blvd
suite 130 PMB 1259
Jacksonville FL 32225

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12220 Atlantic Blvd
suite 130 PMB 1259
Jacksonville FL 32225

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:

Amanda Hummand

New Registered Office Address:

12220 Atlantic Blvd suite 130 PMB 1259

Enter Florida street address

Jacksonville

Florida

32225

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>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>Amanda Hammond</u>	<u>13364 Beach Blvd #924</u>	<input checked="" type="checkbox"/> Add
		<u>Jacksonville FL 32224</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Angela Hammond-Stephens</u>	<u>13364 Beach Blvd #926</u>	<input checked="" type="checkbox"/> Add
		<u>Jacksonville FL 32224</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Alexus Hammond-Stephens</u>	<u>13364 Beach Blvd #924</u>	<input type="checkbox"/> Add
		<u>Jacksonville FL 32224</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>AMBR</u>	<u>Alexus Hammond-Stephens</u>	<u>13364 Beach Blvd #926</u>	<input type="checkbox"/> Add
		<u>Jacksonville FL 32224</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

The name change of new business is: Amy Empowered LI
The EIN update for business: 92-239-5559

Updated RA; updated members

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 90th day after the record is filed.

Dated ~~Feb~~ February 27th, 2024.



Signature of a member or authorized representative of a member

Amanda Hammond

Typed or printed name of signer