

L230000087162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

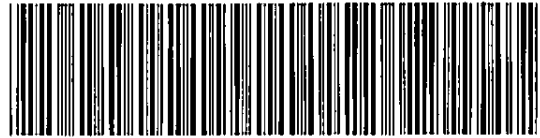
(Business Entity Name)

(Document Number)

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2023 APR 20 PM 1:10  
CLERK OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO: Registration Section ·  
Division of Corporations**

**SUBJECT:** Double E & Associates, 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:

Aimee Farabee

Name of Person

Double E &amp; Associates, LLC

Firm/Company

8723 Sandy Plains Dr.

Address

Riverview, FL 33578

City/State and Zip Code

**livelongandlift@gmail.com**

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

For further information concerning this matter, please call:

Aimee Farabee

813

503-0323

at ( )

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**

FILED

2023 FEB 20 PM 1:10

Double E & Associates, LLC

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

STATE  
OF FLORIDA

The Articles of Organization for this Limited Liability Company were filed on February 23, 2023 and assigned  
Florida document number L23000087162.

This amendment is submitted to amend the following:

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

Live Long & Lift, 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)

**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



2023 JUN 20 PM 1:10  
CLERK OF STATE  
TALLAHASSEE, FL

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JAN 20 PM 1:10  
CLERK OF STATE  
TALLAHASSEE, FL  
2023

(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.

Dated April 17th, 2023

Aimee Farabee

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Typed or printed name of signee

**Filing Fee: \$25.00**