

L23000132843

(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



300405783193

04/03/23--01009--022 **55.00

FILED
2023 APR -3 AM 11:38
STATE
FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOREPEAK FINANCIAL, 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:

PETRA P. WILKES
Name of Person

LOREPEAK FINANCIAL, LLC
Firm/Company

43496 TREADWAY DRIVE
Address

PUNTA GORDA FL 33982
City/State and Zip Code

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

FILED
2023 APR -3 AM 11:38
STATE
OFF
FL

For further information concerning this matter, please call:

PETRA P. WILKES at (239) 791-9978
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**

LOREPEAK FINANCIAL, 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 MARCH 15, 2023 and assigned
Florida document number L23000132843.

This amendment is submitted to amend the following:

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

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)

4085 HANCOCK BRIDGE PKWY
SUITE 112
N. FORT MYERS FL 33903

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4085 HANCOCK BRIDGE PKWY
SUITE 112-116
N. FORT MYERS FL 33903

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:

Lissa Tepas (the UPS Store)

New Registered Office Address:

4085 Hancock Bridge Pkwy Sk12

Enter Florida street address

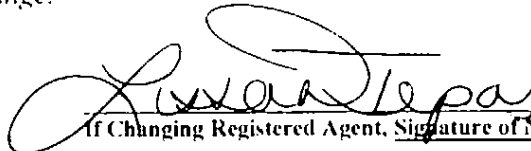
N. Ft Myers Florida 33903

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>
MGR	Petra P. Wilkes		<input type="checkbox"/> Add
		4085 Hancock Bridge Pkwy	<input type="checkbox"/> Remove
		N. Fort Myers, FL 33903	<input checked="" type="checkbox"/> Change
ABR	Petra P. Wilkes		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	Alicia R. Thompson		<input type="checkbox"/> Add
		4085 Hancock Bridge Pkwy	<input type="checkbox"/> Remove
		N. Fort Myers, FL 33903	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

STATE
FL
2023 APR - 3
APR 11: 53

[illegible]

(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.

Signature of a member or authorized representative of a municipality

Signature of a member or authorized representative of a member

PETRA P. WILKES

Typed or printed name of signee

2023 APR -3 AM 11:38
STATE
FL

10