L23000191284

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COVER LETTER

Division of Corp	tion porations			
collura insur SUBJECT:	ance agency of central florida	ı LLC		
SOBRECT:	Name of Lin	ited Liability Company		
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	Filing Angela			
	ZenBusiness, Inc.	Name of Person		
	336 F. College Ave., Suite	Firm/Company 2 301		
	Tallahassee, FL 32301	Address		
	ra@zenbusiness.com	City/State and Zip Code		
	E-mail address: (to be used for future annual report notifi	ication)	—: : :
For further information co	ncerning this matter, please co	all:		Ξ. (3)
Filing Angela		844 493-6249	111	تن
Name of	Person	at () 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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Cemer Circle Tallahassee, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

collura insurance agency of central florida 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 $\frac{4/18/2023}{1}$ and assigned Florida document number 1.23000191284 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 "LLC" 5238 Cape Hatteras Dr Enter new principal offices address, if applicable: Clermont, FL 34714 (Principal office address MUST BE A STREET ADDRESS) Lake CountyUS 5238 Cape Hatteras Dr. Enter new mailing address, if applicable: Clermont, FL 34714 (Mailing address MAY BE A POST OFFICE BOX) Lake CountyUS 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 City

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
MGR	Paul S. Collura		
			Remove
		5238 Cape Hatteras Dr	B Kellove
		Clermont, FL 34714	
	Michael Like Collura	5238 Cape Hatteras Dr	
MGR		Clermont, FL 34714	B Add
			□ Remove
			Change
	Christine M. Bonagura	5238 Cape Hatteras Dr	C.mange
AMBR	•	Clermont, FL 34714	■ Add
			☐ Remove
			Change
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Tective date, if other than the date of filing:	(optional)	
on effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicat ocument's effective date on the Department of State's records.	date of filing or more than 90 days after filing.) Pursuant to 6	
	an effective time, at 12:01 a.m. on the ear	lier o
The 90th day after the record is filed. ated06/152023 . 2023		iier o
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The 90th day after the record is filed. ated		ner d
record specifies a delayed effective date, but not The 90th day after the record is filed. ated	an effective time, at 12:01 a.m. on the ear an accordance of a member	ner o

Page 3 of 3

Filing Fee: \$25.00