L23000215730

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(During Falls Mark)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500420301765

12/18/23--01013--009 **25.00





COVER LETTER

TO: Registration Solution of Col					
SUBJECT: Oh	ristian Hill	146			
	Name of Linu	ted Liability Company			
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.			
Please return all correspondence	ondence concerning this matter t	to the following:			
	Chri	stian Hill			
		Name of Person			
		Firm/Company			
	340 Penu	Carrow Circi	le		
		City/State and Zip Code 1. 1/c Q q mai/. Co			
	Abriction bil	City/State and Zip Code	14.4		
	E-mail address: (to	be used for future annual report notifi	ication)	2023 351	
For further information c	oncerning this matter, please ca	ll: " _e , '	•	DEC	3
Christian	Hill	ar (407) 867-	7853	2023 DEC 18 AM 11: 0	garant garant
Name o	f Person	Area Code Daytime	Telephone Number	HII: O	e pure Menti
Enclosed is a check for the	he following amount:			다 금 그	
⊠ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
Mailing Addres		Street Address:			
Registration S	Section	Registration Sect	tion		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Christian Hi	ill, LLC	
(Name of the Limited L (A F	iability Company as it now appears on our recordorida Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liabil Florida document number <u>L 2 3000</u> 2/5	lity Company were filed on <u>05/02/</u> 	12023 and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words Enter new principal offices address, if applicable		C" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET A		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or registated and/or the new registered office address he	tered office address on our records, enter	r the name of the new registered
Name of New Registered Agent:		OI PATE
New Registered Office Address:	0 00 10	
	Enter Florida street addre	
	City:	lorida 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael Chapmen	110 50th Ave E, Unit St. Pete Beach, FL 33;	[X]Add
	,	St. Pete Beach, FL 33	<u>U6</u> □Remove
			□ Change
			□Add
			Remove
			[] Change
			□Add
			Remove
			Clanange 60 00 00 00 00 00 00 00 00 00 00 00 00
			□Change
			□ Add
			□Remove
			□Change
			🗆 Remove
			□ Change

			·			
						
-						
						
					 	
			.			
		····				
					_	
					023 (SEC	• महिन्दु
					7. 6	eserter Pares
-					S &	ار ار ال ب
					SSEE ST	- 1000 Victor
			-41 -2		FLE O	
. Effective date, if ot	her than the date of	filing		(option		
(If an effective date is list Note: If the date inse	ted, the date must be specificated in this block does date on the Department	fic and cannot be prior to not meet the applies	to date of filing or more able statutory filing t	than 90 days after fi	ling.) Pursuant to 605.0	0207 (3) d as the
the record specifies a decord is filed.	clayed effective date, bu	at not an effective tir	ne, at 12:01 a.m. on	the earlier of: (b)	The 90th day after	the
Dated		·				
-		AttIT	_)			
	Signature	e of a member or autho	rized representative of	a member	-11	
		Charle.	in Hill			
		Typed or printe	d name of signee			