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## **COVER LETTER**

Division of Corpor	rations	_			
SUBJECT: LO	Kate Spri	ngs LLC.	<del></del>		
	Traine or Gin	nece challing Company			
The enclosed Articles of Am	endment and fee(s) are sub	mitted for filing.			
Please return all corresponde	ence concerning this matter	to the following:			
	Roby.	Name of Person	<u></u>		
		Spring S L			
	4019 Oak Forest Cir Address				
Marietta, (1A 30062  City/State and Zip Code  bachman. Siblings @gmail.com  E-mail address: (to be used for future annual report notification)					
-	bachman. E-mail address: (	Siblings @gm to be used for future annual report	notification)		
For further information conc	erning this matter, please ca	all:			
Robyn Bac Name of Pe	hnan	at ( <u>U78</u> ) 976 Area Code Da	8-5523 sytime Telephone Number		
Enclosed is a check for the fo	ollowing amount:		/		
□ \$25.00 Filing Fee	J30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address		Strout Addres	ç.		

TO:

Registration Section

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

## TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liab	pility Company as it now appears on our records.) ida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number <u>L23000230813</u> This amendment is submitted to amend the following:  A. If amending name, enter the new name of the li	Company were filed on 5 10 2023 are assigned 28 PM IZ
The new name must be distinguishable and contain the words "L	imited 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 ADI	DRESS) 5601 S. Woodside Terrace Homosassa, FL 34446
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4019 Oak Forest Cir Marietta, MA 30062
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, <u>enter the name of the new registered</u> ::
Name of New Registered Agent:  New Registered Office Address:	Robyn Bachman  5601 S. Woodside Terrace  Enter Florida street address
	Homosassac Florida 34446  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>	Address	Type of Action
MUR	United States Corporations	Jacksonville EL 377	□Add
	Agents, Me.	Jacksonville, FL 3220	2 Remove
			□Change
AMBR	Robyn Bachman	5601 S. Woodside Te	Madd MAdd
·	•	Homosassa, FL 344	<u>He</u> □Remove
			□Change
			□Add
		<u>-</u>	□Remove
			□Change
			□Remove
		<u> </u>	
			DAdd
			Remove
			□Change
			□Add
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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. negative of a member or authorized representative of a member