L23000 239 492

(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



200413413532

09/29/23--01004--008 **25.00

2023 SEP 29 PH 1: 59
SECRETARY US FILE
TALLAUASSES FILE

123 GEP 29 PH 1: 43

COVER LETTER

TO: Registration Se Division of Cor					
cunicar.	(Lale.	a) (70 - 1/1)			
SUBJECT:	Name of Lim	el Group LCC ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Thomas	A. Dropen Name of Person			
		Firm/Company			
	_50 W	CAE ENOUL T	7n 3860 K	2023 SE	۾ ۾ دستنده
	Tuisun	Az 8573 City/State and Zip Code		1023 SEP 29 PH 1:5	- 100
		to be used for future annual report noti		7 TK	Ü
For further information e	oncerning this matter, please c	_	ı r	1 •	
Thoma Da Name o		at (<u>5Zo</u>) <u>334</u> - Area Code Daytim	8692 e Telephone Number		
Enclosed is a check for the	e following amount:				
Z \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	f Status & - py	

 $S_{i,j} = \{ x_i \mid x_i = x_i = x_i \}$

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

Unlevel (TAD)	LL.C
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number	were filed on $\frac{5/i5/23}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit Enter new principal offices address, if applicable:	y Company," the designation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	JO W GREENOUL DU.
(Mailing address MAY BE A POST OFFICE BOX)	Tucion Az 85737
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	dress on our records, enter the name of the new registered
Name of New Registered Agent:	SE SE
New Registered Office Address:	Enter Florida street address 200 7
	Florida — Jas Code
New Registered Agent's Signature, if changing Registered Agent:	- 1 S

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, 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
AMBR	Lindsay D. BAEDER	50 W. Greeneck Dr. Turson, AZ 85737	
		1023011 22 8 8 7 3 7	□Remove
			🗆 Change
			🗀 Add
			□Remove
		SEC	Change 1
		AHA STORY	Change Change Change Change
		15	Change
			□Remove
			□Change
<u></u>			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

								,				
<u> </u>		 					_			_		
	. <u></u>											
						· -			<u></u>			
								-				
			.	_		_		-				
					<u>.</u>			<u></u>				
•					_							
				-			-			_		
						-		<u>_</u> .	_			
									ن	<i>j):</i> T 1	7023	
									<u> </u>		SEP	
										<u> </u>	1 72	F. Frankling
						<u> </u>			. ح: رز		9	
									S E	유	PH	ر الم
											ري	<u></u> -
			<u>-</u>		•					(<u>ت</u>	
			 -			_						<u>-</u>
						- -			<u></u>	<u>-</u>		
ffective date,	if other tha	in the da	te of filin	g:					(optiona	d)		
an effective date ote: If the date	is listed, the d inserted in	ate must be this block	specific and does not r	d cannot neet the	be prior to applical	date of til	ing or more	than 90 day	s after fili ts. this da	ng.) P ite w	ursuant	to 605,020 se listed a
ocument's effec	tive date on	the Depa	rtment of S	State's r	ecords.			,		-		- 1.0.000
record specifies is filed.	a delayed e	ffective da	ite, but not	an effe	ctive tim	ie, at 12:0	l a.m. on	the earlier	of: (b) - '	The 9	90th day	y after the
18	SEME	MB-BM	~									
. 0		29	th	. Z	023							
ated						-						
ated			_ , ,	.)								
ated		<u> </u>	nature of a	<u> </u>	or author	mad = m=aa						

. . . .

Filing Fee: \$25.00