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COVER LETTER

	Registration Se Division of Co					
SUBJEC		OSH PARTNERS LLC				
SUBJEC	SUBJECT: Name of Limited Liability Company					
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please ret	urn all correspo	ondence concerning this matter	to the following:			
		Dan Neal				
			Name of Person			
		Mac & Tosh Partners LLC				
			Firm/Company	· · · · · ·		
		2408 NW 13th Place				
			Address			
		Gainesville, FL 32605				
		dneal@ufl.edu	City/State and Zip Code			
		E-mail address: (to be used for future annual report notification)	202 3EC 7A		
For further	r information c	oncerning this matter, please c	all:	300) REJ		
Dan Neal			561 713-5064	2023 OCT -5 SECRETATAY TALLATAY		
	Name o	f Person	Area Code Daytime Telephone N	umber 5		
Enclosed	is a check for th	ne following amount:		$m = \overline{\delta}$		
■ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certified Copy is enclosed) Certified Copy is enclosed)	.00 Filing Fee, rtificate of Status & rtified Copy fitional copy is enclosed)		
[P	Mailing Addres Registration S Division of C P.O. Box 632 Fallahassee, I	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303	iite 810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MAC & TUSH PARTNERS LLC		
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000242092</u> .	were filed on May 17, 2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2
(Principal office address MUST BE A STREET ADDRESS)		17ALL
		5 5
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		- 10 E
		ர ச
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u> </u>
	, Florid	la
	I INV	/ID L DOE

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, 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
Mrg	Nicole P. Neal	2408 NW 13th Place	□Add
		Gainesville, FL 32605	■Remove
			□Change
			□ Add
			□Remove
			Change
			Add CT Remove
			Remove Change
			□Add
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fective date, if other than the date of filing: in effective date is listed, the date must be specific and cannot be p				filing.) Pr		
ote: If the date inserted in this block does not meet the apcument's effective date on the Department of State's reco		tutory filing req	uirements, this	date wi	ll not b	e listed
ecord specifies a delayed effective date, but not an effective is filed.	ve time, at 1	2:01 a.m. on th	e earlier of: (b) The 9	Oth day	after th
0.1.0						
October 2 , 2023 ,	<u> </u>					
Signature of a member or a						