

L23000264092

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

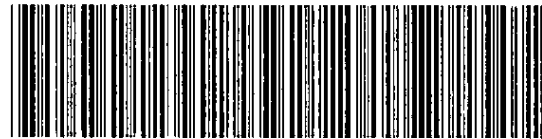
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05/12/2023 11:01 AM

FILED

2023 SEP 12 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FL.

RECEIVED

2023 SEP 12 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 12 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Generic Holdco LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marsha Follmar

Name of Person

Generic Holdco LLC

Firm/Company

2729 Fort Knox Blvd, Suite 1300

Address

Tallahassee FL 32308

City/State and Zip Code

Marsha@inkbridge.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marsha Follmar

Name of Person

at (850)

Area Code

510-5389

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 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**

FILED

2023 SEP 12 AM 11:33

Generic Holder LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 5/31/2023 and assigned
Florida document number L23CCO.264092

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2729 Fort Knox Blvd
Suite 1300
Tallahassee, FL 32308

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2729 Fort Knox Blvd
Suite 1300
Tallahassee, FL 32308

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

Florida

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Burkette, John Thomas	3919 West Miller's Bridge Rd	<input type="checkbox"/> Add
		Tallahassee, FL 32312	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Fellner, Marsha	2729 Fort Knox Blvd	<input checked="" type="checkbox"/> Add
		Suite 1300	<input type="checkbox"/> Remove
		Tallahassee, FL 32308	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

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.

Marsha Tolman
Signature of a member or authorized representative of a member

Marsha Follmer
Typed or printed name of signer