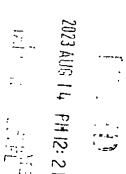
623000279809

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



800413344448

09/14/20--01022--010 ++60.00



Office Use Only

COVER LETTER

Division of Cor	rporations		
INCREDI	BLÉ FAMILY HEALTH & WE	ELLNESS LLC	
SUBJEČT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jeanne Kerr		
	 	Name of Person	
	INCREDIBLE FAMILY F	IEALTH & WELLNESS	
		Firm/Company	
	3050 Bryce Court		
		Address	· · · ·
	Deltona, FL 32738		
		City/State and Zip Code	
	jkerr0417@gmail.com	to be used for future annual report notificati	<u> </u>
For further information of	concerning this matter, please c	·	011)
Jeanne Kerr		812 306-6693	
Name o	of Person		ephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addre</u> Registration		Street Address: Registration Section	n

Registration Section Division of Corporations P.O. Box 6327

TO:

Registration Section

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

INCREDIBLE FAMILY HEALTH & WELLNESS LLC

2023 AUS 14 PM 12: 21

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 06/09/2023 and assigned Florida document number L23000279809 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Alexis Rudolph	6915 Main St. Apt 243	
		Miami Lakes, Fl 33014	■Remove
AMBR	Kevin Kerr	3050 Bryce Court	
		Deltona, FL 32738	■Remove
			□Change
AMBR	Andrew Kerr	3050 Bryce Court	□Add
		Deltona, FL 32738	■Remove
			☐ Change
MGR	Jeanne Kerr	3050 Bryce Court	🗀 Add
		Deltona, FL 32738	□Remove
			■Change
AMBR	Jeanne Kerr	3050 Bryce Court	æ Add
		Deltona, FL 32738	□Remove
			Change
			□Add
		□Remove	
			□Change

					- - - -
					- - -
					- -
					
					_
					_
					_
					_
· •···		-	···		_
<u> </u>					-
					_
					_
					_
					
late of filing:	prior to date		than 90 days after f	iling.) Pursuant to 6	
date, but not an effect	tive time, at	12:01 a.m. on t	he carlier of: (b)	The 90th day at	ter the
. 2023	·				
_					
Signature of a member or	r authorized r	epresentative of a	member		
i >>	date of filing: the specific and cannot be ock does not meet the apartment of State's received date, but not an effect and specific and cannot be determined as a specific	be specific and cannot be prior to date ock does not meet the applicable stepartment of State's records. e date, but not an effective time, at 2023	date of filing: the specific and cannot be prior to date of filing or more speck does not meet the applicable statutory filing respective to the spartment of State's records. e date, but not an effective time, at 12:01 a.m. on the spartment of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member or authorized representative of a signature of a member of a member or authorized representative of a signature of a member of a signature of a member of a mem	date of filing:	date of filing: