## 123000291507

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## **COVER LETTER**

TO: Registration Section Division of Corporations						
CURTECT:	Future Fina	ncial Holdings LEC SPACE	E COAST LLC			
Name of Limited Liability Company						
The enclosed	ł Artieles of	Amendment and fee(s) are sub-	mitted for filing			
		ndence concerning this matter	<u>-</u>			
i lease return	i an correspo	ndence concerning and matter	to the tenowing.			
		Robert Lynn				
			Name of Person			
		Future Financial Holdings	LLE SPACE COAST	LLC		
	Firm Company					
		1649 Landing Ln				
			Address			
		Neptune Beach, FL 32266				
			City/State and Zip Code	<del></del>		
		finance@future.loans	o be used for future annual report n	stification)		
For further in	nformation co	oncerning this matter, please or	·	,		
Robert Lynn			904 624-3125			
Name of Person			ime Telephone Number			
Enclosed is a	check for th	ne following amount:				
■ \$25,00 F	Filing Fee	☐ \$30.00 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)		
Reg Div P.C	fling Address gistration S vision of C D. Box 632 llahassee, F	Section orporations 7	Street Address: Registration S Division of C The Centre of 2415 N. Mon Tallahassee, I	orporations Tallahassee roe Street, Suite 810		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2024 OCT 23 AT

Future Financial Space Coast LLC (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  $\frac{06/17/2023}{1}$ and assigned Florida document number <u>L23000291507</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 registered agent and/or the new registered office address here: N/A Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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.

City

. If amonding 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>	Type of Action
MGR	Nick Walker	2510 Lake Ruby Rd	
		Deland, FL 32724	■Remove
		<del> </del>	= Change
MGR	Marilyn Elder	1649 Landing Ln	
		Neptune Beach, FL 32266	≅Remove
			[J]Change
			∐Remove
			□ Change
			□Add
			□Remove
			UChange
			∐Remove
			□ Change
	,		
			□Remove

Typed or printed name of signee