## LZ3000299451

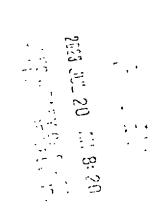
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## COVER LETTER

TO:	Registration Se Division of Cor		•	•	
	-BE ABUNE	DANT LLC (L23000299451)			•
SUBJI	ECT:				
	-	Name of Lim	ited Liability Company	•	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		ALKIS CRASSAS			
			Name of Person	•	_
		BE ABUNDANT LLC			
			Firm/Company		_
		6031 BOWEN DANIEL D	R. UNIT 102		
			Address		_
		TAMPA FL 33616			
		ALKIS.CRASSAS@EOSW	City/State and Zip Code FORLDWIDE.COM		-
		E-mail address: (	to be used for future annual report not	ification)	
For fu	rther information c	oncerning this matter, please c	all:		
	S CRASSAS	F F	813 690-3867		
			at ()		
	Name o	f Person		ne Telephone Numbe	 :T
Enclos	ed is a check for the	he following amount:			
□ \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status &
	Mailing Addres		Street Address:		
	Registration !		Registration Se		
	Division of C P.O. Box 632	•	Division of Co The Centre of 1	•	
	Tallahassee,			e Street, Suite	810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BE ABUNDANT LLC (L23000299451)	
( <u>Name of the Limited Liability Company as it r</u> (A Florida Limited Liability C	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fi Florida document number	led on June 21, 2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	mpany here:
The new name must be distinguishable and contain the words "Limited Liability Comp	pany," 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 agent and/or the new registered office address here:	on our records, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
Cin	Florida

New Registered Agent's Signature, it 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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
		<del></del>	□Change
	<del></del>		
			□Remove
			□ Change
			□ Add
			□Remove
			□ Change
			□Remove
			□ Change
	<u>.</u>	<del></del>	□Add
			□Remove
			□Change

		—
PROVIDE COACHING, T	TRAINING AND FACILITATION SERVICES	
TO ENTREPREUNERIAL	L ORGANIZATIONS SO THEY CAN ACHIEVE	
VISION, TRACTION AND	) TEAM HEALTH	
ffective date, if other than the an effective date is listed, the date in this becament's effective date on the learning that the learning date of the learning date.	must be specific and cannot be prior to date of filing or more than 90 days after filing block does not meet the applicable statutory filing requirements, this date	g.) Pursuant to 605.0
record specifies a delayed effecti d is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) T	he 90th day after t
	2023	
JUEY 14		
JULY 14 Pated	Signature of a member or authorized representative of a member	