L23000343346

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Busiliess Entity Name)
(Document Number)
Certified Copies Certificates of Status

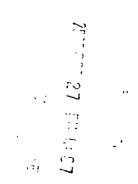
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: Registration Se Division of Cor		•	•
Gutter Me	Up LLC		
SUBJECT:	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:	
	Matthew Carson Segui		
	-	Name of Person	
	Gutter Me Up LLC		
		Firm/Company	
	420 Plantation Grove Land		
	 	Address	
	Saint Augustine, Florida 3	2086	
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	2 () () () () ()
	guttermeup@gmail.com		t
	E-mail address: (to be used for future annual report notification)	27
For further information of	oncerning this matter, please c	all:	1 : :
Bryce Joseph Segui		561 628-2076	
Name o	d Person	Area Code Daytime Teleph	one Number
Enclosed is a check for the	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)
Mailing Addres	_	Street Address:	
Registration Section Division of Corporations		Registration Section Division of Corporation	ons
P.O. Box 632		The Centre of Tallaha	
Tallahassee,	FL 32314	2415 N. Monroe Stree	t, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gutter Me Up LLC	• · · · · · · · · · · · · · · · · · · ·	
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our recited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Comp		
Florida document number L23000343346		
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 L	iability 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	5)	
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		3
Catan war walliam adduser if applicables		
Enter new mailing address, if applicable:		. 2
Mailing address MAY BE A POST OFFICE BOX)		
		· · · · · · · · · · · · · · · · · · ·
D. If any and in a the majutaned count and/or majotaned off	Tan address on our renords, on	tor the name of the new rayis
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records, en	ter the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
 :	Enter Florida street aa	ldress
_		, Florida Zip Code
	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 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
MGR	Bryce Joseph Segui	109 Tahoe Lane	
		Saint Augustine, Florida 32086	□Remove
			□Change
			□Add
		·	□ Remove
			□Change
			<u> </u>
			Remove
			Change
			Add
			□Remove
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s after filing.)) Pursuant to 605, will not be liste
of: (b) The	e 90th day after
	(optional) s after filing. s, this date

Typed or printed name of signee