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To:

Division of Corporations

Fax Number

: (850)617-6383

from:

Account Name : TAX ZONE INC.
Account Number : 120190000044
Phone : (407)888-3131
Fax Number : (886)453-0509

\*\*Enter the enail address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: ACCOUNTAINTA) taxzonell com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CHARLEY WITHERSPOON LLC

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From. Tax .

## **COVER LETTER**

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ፍተሙ ተድረጉ.	CHARLEY	WITHERSPOON LLC		
SUBJECT.		Name of Lin	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return	n all correspo	ondence concerning this matter	to the following:	
		ED KOTLER		
			Name of Person	
		TAX ZONE INC		
			FirnvCompany	TOTAL
		8865 COMMODITY CIR		
			Address	
		ORLANDO, FL 32819		
		A CONTRACTOR AND A STATE OF A STATE OF	City/State and Zip Code	
		ACCOUNTANT@TAXZO	NEFE.COM  To be used for future annual report notifie	ation)
Por further i	nformation c	oncorning this matter, please c		
ED KOTLE	R		407 888-3131	
garag A nganillagili P. Panggalyakanga dari Pilip P. Pal	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	ne following amount:		
□ \$25.00 I	Filing Fee	S30.00 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
Re Dir P.C	iling Addres gistration S vision of C J. Box 632 Hahassee, I	Section Porporations 7	Street Address: Registration Section Division of Corportion Control (1988) The Centre of Tallahassee, FL 3	orations Hahassee Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number <u>L23000364925</u>	were filed on <u>08/03/2023</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the a	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)	الشنا اليهم اللهوات على المراجع الم	na di disembalik di karan da mana da m
	der vid vid entre til til medd i ar tha a british mir mir til man griff og entre til til til til til til til t	
B. If amending the registered agent and/or registered office adent and/or the new registered office address here:	ddress on ou <b>r</b> records, <u>enter the na</u>	ine of the new registe
Name of New Registered Agent:	-	-[] <b>교</b> 대립 <b>교</b>
New Registered Office Address:	**************************************	6 T
	Enter Florida street address Florida	
many specific and the same state of the same sta	Cin:	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		<b>22</b>

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>	Name	Address	Type of Action
AMBR	WITHERSPOON, CHARLEY	575 DELANCEY DR	<b>=</b> Add
-		DAVENPORT, FL 33837	□ Remove
			☐ Change
			□Add
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			□ Remove
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	• 46 (1) 500 (1) 6 (1)	□ Remove	
			□Change
		□Add	
		□Remove	
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing:  (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);  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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.
Dated Nogost 16 2033  Marchity Will Wigner of a member of a member
Charley Whersoon Typed or printed named of signee