

L23 000 369 237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

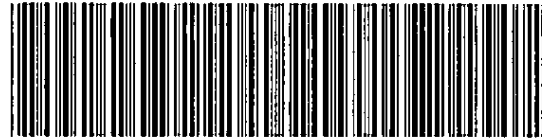
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200418357682

11/21/23--01002--011 **25.00

FILED

2023 NOV 21 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2023 NOV 21 AM 10:09

DIRECTOR'S OFFICE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ingenious Financial Solutions LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luckner Philogene

Name of Person

Ingenious Financial Solutions LLC

Firm/Company

15005 Ne 6th Ave Apt# 204

Address

Miami

City/State and Zip Code

ingeniousfinancialsolutions@gmail.com

E-mail address: (to be used for future annual report notification)

FILED
2023 NOV 21 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Luckner Philogene

305 879-3581

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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**

Ingenious Financial Solutions 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 August 07, 2023 and assigned
Florida document number 1.23000369237.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

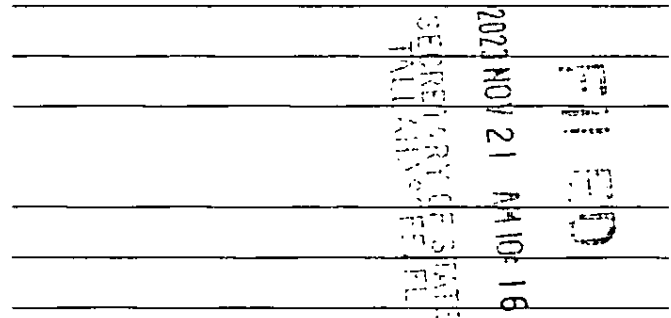
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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 registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Querby Laveau	11250 Briar Forest DR Apt# 281	<input checked="" type="checkbox"/> Add
		Houston, Tx 77042	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Lyonel Payne	1000 Lake Regency Dr Apt# 106	<input checked="" type="checkbox"/> Add
		Atlanta, Ga 30349	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2023 NOV 20 AM 10:16
FILED
SECRETARY OF STATE
TALLAHASSEE, FL

SECRETARY OF DEFENSE
2023 NOV 21 AM 10:16
TALLAHASSEE, FL

SECRETARY OF THE ARMY
WASHINGTON, D.C. 20315
2023 NOV 21 AM 10:16
SECRETARY OF THE ARMY
WASHINGTON, D.C. 20315

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.

Dated September 09, 2023

Ann Kern

Luckner Philogene

Typed or printed name of signee