123000405602

(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:





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SECRETARY OF STATE SECRETARY OF STATE FILED

Y. SCOTT NOV - 2 2023



October 14, 2023

HAROLD DORSEY 4862 NW 8TH ST PLANTATION, FL 33317

SUBJECT: THE LIMITLESS COLLECTIVE LLC

Ref. Number: L23000405602

We have received your document for THE LIMITLESS COLLECTIVE LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE COMPLETE APLLICATION!

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6053.

Letter Number: 923A00023853

Yvette Scott Supervisor

www.sunbiz.org

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	he Limitless (Collective	
	Name of Limi	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
	ndence concerning this matter		
	Hand	Name of Person Mitless Collective Firm Company	2023 NOV -1
	<u> </u>	JW 8th St	CORPORATIONS 1 PH 3: 09
	- Plantation,	FL 33317 City/State and Zip Code	09
	The Limitess E-mail address: (Colocitye C asl. con to be used for future annual report notice	ncation)
For further information c	oncerning this matter, please c	all:	
Harold Name o	f Person		- 8440 e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Division of C P.O. Box 632	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of 7	rporations
Tallahassee.	rL 32314	2410 N. MOITO	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Limitless Coll	ective LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	v as it now appears on our records. ability Company)	.)
The Articles of Organization for this Limited Liability Company w	vere filed on <u>8/29/23</u>	and assigned
Florida document number <u>L23004057602</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	<u> </u>	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		51V13
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	FILED STATE STORE OF COMPORATIONS
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter t</u>	the name of the new registered
Name of New Registered Agent:		_
New Registered Office Address:	Enter Florida street address	
	, Flo	orida
	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

Title	Name	Address	Type of Action
MCR_	Ramona Dorsoy	401 Llongollen Blud	
	O	New Castle, DE 19720	Remove
			□Change
Mer_	Mark Palm	1805 Roselyn St	
		Philadelphia, PA 19141	tkemove
			□Change
MER_	Darold Oarsay	4 N Booth Dr	
	U	Now Castle, DF 19720	KRemove
			□Change
			AON EZOZ PORTOSINA PORTOSI
			PH 3
			S
			□Remove
			Change
			□Add
			□Remove
			□ Change

N/A				
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				202:
				AON \$205 \$101/2010
				FIAR DF C
			·	PH 0250
				3. 09
			-	9 8
If an effective date is liste Note: If the date inse	her than the date of fili ed, the date must be specific a crted in this block does not date on the Department of	nd cannot be prior to date ${ m i}$ meet the applicable ${ m s}$	of filing or more than 90 d	_ (optional) ays after filing.) Pursuant to 605.0207 nts, this date will not be listed as
he record specifies a de ord is filed.	dayed effective date, but n	ot an effective time, a	. 12:01 a.m. on the earlie	er of: (b) The 90th day after the
Dated Octob	XX 33 rd Signature of	2003	representative of a member	
	- ,	/		