

L23 000419215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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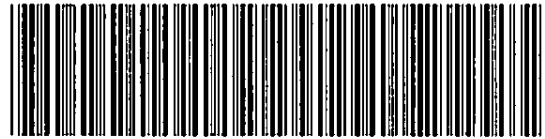
Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE

APR - 2 2024

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03/20/24 -01021--003 **25.00

FILED
24 MAR 20 PM 1:52
JULIA S. LEE, CLERK
COURT OF COMMON PLEAS
JULIA S. LEE, CLERK

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Shared Success Marketing 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:

Skylar Donovan

Name of Person

Shared Success Marketing LLC

Firm/Company

7071 103rd St Unit 306

Address

Jacksonville, FL 32210

City/State and Zip Code

skylar.r.donovan1@gmail.com

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

For further information concerning this matter, please call:

Skylar Donovan

706 531-6452
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**

Shared Success Marketing LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
24 MAR 20 PM 1:54
CLERK OF THE COURT
JACKSONVILLE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 09/08/2023 and assigned
Florida document number L23000419275.

This amendment is submitted to amend the following:

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

Shared Success Consulting LLC

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:

Skylar Donovan

New Registered Office Address:

7071 103rd St Unit 306

Enter Florida street address

Jacksonville

City

Florida 32210

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

[illegible]

(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)(b)

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 March 15, 2024

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Skylar Donovan

Typed or printed name of signee