

# L23000420803

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

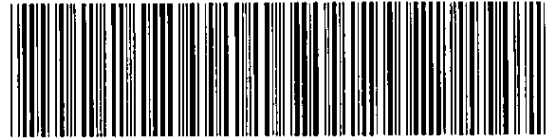
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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To Whom It May Concern,

Effective October 1<sup>st</sup>, 2024 Crystal Harper will no longer be Manager, Authorized Member, or Business Partner of Vintage Revival LLC. EIN number 93-3355443

Effective October 1<sup>st</sup>, 2024 Megan Roark will be Mager, Authorized Member, and sole Business Owner of Vintage Revival LLC.

Signed: Megan Roark

Name: Megan Roark Date: 9/24/24

Signed: Crystal Harper

Name: Crystal Harper Date: 9/24/24

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Vintage Revival 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:

Megan Beark  
Name of Person

Vintage Revival LLC  
Firm/Company

3673 Whisperwood Circle  
Address

Melbourne FL 32901  
City/State and Zip Code

VintageRevivalFL23@gmail.com  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Megan Beark at (321) 626-0324  
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

102

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Vintage Revival 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 September 11, and assigned  
Florida document number L23000420803 2023

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: \_\_\_\_\_

Megan Boark

3673 Whisperwood Circle

Enter Florida street address

Melbourne

City

, Florida

32901

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.*

Megan Boark

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>
MGR	Crystal Harper	1415 Hollywood Blvd.	<input type="checkbox"/> Add
		W. Melbourne, FL 32904	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Crystal Harper	1415 Hollywood Blvd.	<input type="checkbox"/> Add
		W. Melbourne, FL 32904	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Megan Boark	3673 Whisperwood Cir	<input checked="" type="checkbox"/> Add
		Melbourne, FL 32901	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Megan Boark	3673 Whisperwood Cir	<input checked="" type="checkbox"/> Add
		Melbourne, FL 32901	<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

[illegible]

**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 5<sup>th</sup>, 2024.

Signature of a member or authorized representative of a member

Typed or printed name of signee