

L23 000426635

(Requestor's Name)

(Address)

VOID

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

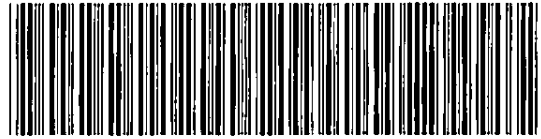
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/11/24--01028--020 **25.00

03/28/24
KAT

2024 MAR 1 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FL
VOID

On 03/27/24 Mr. Dupree requested that we not file the amendment and requested a refund because he made the changes on the annual report. Annual Report was filed on 03/27 and Amendment was processed on 03/28.

COVER LETTER

VOID
O: Registration Section
Division of Corporations
REIGN & VAUNT LLC

SUBJECT: _____

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:

Justin Dupree

Name of Person

Reign & Vaunt LLC

Firm/Company

626 Shady Nook Dr

Address

Brandon, FL 33511

City/State and Zip Code

justind@lastcallpayments.com

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

For further information concerning this matter, please call:

Justin Dupree

727

475-6595

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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FL
VOID

VOID

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

REIGN & VAUNT 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 9/13/23 and assigned
Florida document number 1.23000426635.

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:

626 Shady Nook Dr, Brandon, FL, 33511

(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

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TALLAHASSEE, FL
VOID

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This image shows a single page from a notebook or ledger. It features ten evenly spaced horizontal black lines across its entire width, providing a guide for writing. The paper itself is plain white, and there are no margins, titles, or other markings present.

(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)

Dated March 6th, 2024

Signature of a member or authorized representative of a member

Justin Dupree

Typed or printed name of signee

Filing Fee: \$25.00

FILED
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TALLAHASSEE FL