## L23 000 H32 H10

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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:





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## **COVER LETTER**

TO: Registration Section

**Division of Corporations** 

Tallahassee, FL 32314

SUBJECT.	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fec(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Johannah One				
	Name of Person				
	The Slightly Sober Club				
	Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing, se return all correspondence concerning this matter to the following:    Johannah One				
Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.    Johannah One					
		Address			
	Clearwater, Florida, 33761				
		City/State and Zip Code			
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tau familia familia a			omication)		
	oncerning this matter, please c				
Johannah One					
Name o	f Person	Area Code Dayti	me Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	-	Certified Copy	Certificate of Status & Certified Copy		
			ection		
		Division of Corporations			
P.O. Box 6327		The Centre of	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Slightly Sober Club 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  $\frac{9/18/2023}{2}$ \_\_\_\_\_ and assigned Florida document number L23000432410 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 "LLC." 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

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

\_\_, Florida \_\_\_

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>	Type of Action
AMBR	Johannah One	2979 Somersworth Drive Clearwater, FL 33761	<b>=</b> Add
			□Remove
			□Change
AR	Johannah One	2979 Somerworth Drive Clearwater, FL 33761	■Add
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		<del> </del>	□Change
	<del></del>	·	🗆 Add
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If amending any other informat	on, enter change(s) here	: (Attach additional	sheets, if necessary.)	
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Effective date, if other than the of (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and cannot be prior took does not meet the application.	to date of filing or more t		
the record specifies a delayed  The 90th day after the reco		an effective time	e, at 12:01 a.m. on t	the earlier of:
Dated October 3rd	. 2023	<u>.</u> .		
Johannah Ons	jungture of a mambar or outho	rized representative of a	member	
	ignature of a member of audio	rized representative of a	meanogr	
Johannah One		d name of signee		