## L23000444991

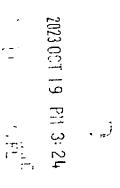
(F	Requestor's Name)
<b>(</b> A	ddress)
(,4	ddress)
	Sity/State/Zip/Phone #)
,-	, , , , , , , , , , , , , , , , , , ,
PICK-UP	WAIT . MAIL
(8	lusiness Entity Name)
(C	ocument Number)
Company Control	Continue of Observe
Centified Copies	Certificates of Status
	5
Special Instructions to	DiFiling Officer:

Office Use Only



300417436153

10/19/23--01010--014 \*\*25.00



Cr 1012712023

## **COVER LETTER**

TO:

TO: Registration So Division of Cor			
SUBJECT: ANGELM	ED SPRING LLC		
SUBJECT:	Name of Lin	ited Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ANGELINA NENARTOV	ИСН	
		Name of Person	_
		Firm/Company	
	7722 NW 124TH TERRA	CE	
		Address	_
	PARKLAND, FL 33076		
		City/State and Zip Code	<del></del>
	ALINENOK.MED@YAHO		_
For further information c	E-mail address: ( concerning this matter, please c	to be used for future annual report notification) all:	
ANGELINA NENARTO	DVICH	305 570-6825	
Name o	f Person	Area Code Daytime Telephone Numb	er
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certific	Filing Fee, cate of Status & ed Copy nal copy is enclosed)
<u>Mailing Addres</u> Registration S		Street Address: Registration Section	
Division of C		Division of Corporations	
P.O. Box 632		The Centre of Tallahassee	0.1.0
Tallahassee, 1	FL 32314	2415 N. Monroe Street, Suite	810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANGELMED SPRING LLC			2023 OCT	19 PH 3: 24
( <u>Name of the Limited I</u> (A l	iability Comp.	any as it now appears o Liability Company)	11 0 d1 1 ( ( 1) 1 d3.)	
e Articles of Organization for this Limited Liabi		zazam, zampuny,	AL:	, NE
e Articles of Organization for this Limited Liabi	lity Company	were filed on SEPT	EMBER 26, 2023	and assigned
orida document number L23000444991				
is amendment is submitted to amend the following				
If amending name, enter the new name of the	e limited lial	oility company here	:	
A				
new name must be distinguishable and contain the words	"Limited Liabi	lity Company," the desig	gnation "LLC" or the abb	previation "L.L.C."
ter new principal offices address, if applicable	2:	N/A		
rincipal office address MUST BE A STREET ADDRESS)		N/A		
	<del></del>	N/A		
nter new mailing address, if applicable:  **International Content of the International Content of the I		N/A		
		N/A		
		N/A		
If amending the registered agent and/or regis	tered office :	address on our reco	rds, <u>enter the name</u>	of the new registo
nt and/or the new registered office address he	ere:			
	17.4			
Name of New Registered Agent:	l/A 			
New Registered Office Address:	!/A			
		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.

Zip Code

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>	Address	Type of Action
AR	ANGELINA NENARTOVICH	7722 NW 124TH TERRACE	🗆 Add
		PARKLAND, FL 33076	
			□Change
MGR ———	ANGELINA NENARTOVICH	7722 NW 124TH TERRACE	<b>=</b> Add
		PARKLAND, FL 33076	🗀 Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		<del></del>	□Change

	<del> </del>	<del>-</del>			<del>_</del>
<del></del>				···-	
			<del>_</del>	<del></del>	<del></del>
					<del>_</del>
			<del></del> _		
	· · · · · · · · · · · · · · · · · · ·				<del></del>
					<del></del>
				<del> </del>	<del></del>
<del></del>			<del></del>		<del></del>
	<del></del>				
					<del></del>
			<del></del>		
Effective data if others than al	l con				
Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this b	ist be specific and cannot be	prior to date of filing	or more than 00 d	(optional)	<b></b>
If the date machied in this b	TOCK GOES HOL INCCLINE A	ひいしいついしゃ くりりいけんかい	filing requirement	ys after filing.) Pursuant its, this date will not b	to 605.0207 (3 se listed as th
- GOCUMENE'S effective date on the F	Department of State's rec	ords.		,	
date of the L					
of the p					
ne record specifies a delayed effective	re date, but not an effecti	ive time, at 12:01 a	.m. on the earlier	of: (b) The 90th day	y after the
ne record specifies a delayed effective	re date, but not an effecti	ive time, at 12:01 a	.m. on the earlier	of: (b) The 90th day	after the
ne record specifies a delayed effective ord is filed.		ive time, at 12:01 a	.m. on the earlier	of: (b) The 90th day	after the
ne record specifies a delayed effective ord is filed.  Dated OCTOBER 11	ve date, but not an effection of the date and the date.	ive time, at 12:01 a	.m. on the earlier	of: (b) The 90th day	y after the
ne record specifies a delayed effective ord is filed.		ive time, at 12:01 a	.m. on the earlier	of: (b) The 90th day	after the
ne record specifies a delayed effective ord is filed.		·		of: (b) The 90th day	after the