L23000469171

(Requestor's Name)
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COVER LETTER

TO:

TO: Registration Se Division of Cor			
Frost Yours	self LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Brittney Evans		
		Name of Person	
	Frost Yourself LLC		
		Firm/Company	
	2725 Botts Landing Rd		
		Address	
	DeLand, FL 32720		
		City/State and Zip Code	
	utws96@yahoo.com E-mail address: (to be used for future annual report notif	ication)
For further information o	oncerning this matter, please c	·	
Brittney Evans		386 8469646 at ()	
Name o	f Person		: Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	S30.00 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)
<u>Mailing Addre</u> s	<u>ss:</u>	Street Address:	
Registration	Section	Registration Sec	
Division of C	•	Division of Corp	
P.O. Box 632		The Centre of T	
Tallahassee,	FL 32314	Tallahassee, FL	e Street, Suite 810 32303

Front & Back

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Frost Yourself LLC	
(Name of the Limited Liability Company : (A Florida Limited Liab	as it now appears on our records.) ility Company)
he Articles of Organization for this Limited Liability Company we	re filed on October 11, 2023 and assigned
lorida document number 1.23000469171	•
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability	v company here:
itles of the 3 Owners from CEO to MGR	
he new name must be distinguishable and contain the words "Limited Liability (Company," the designation "L.L.C." or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	•
	· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET ADDRESS)	
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	~ - 4
nter new mailing address, if applicable:	?-
Mailing address MAY BE A POST OFFICE BOX)	7.5
	Ļ."
-	C2
 If amending the registered agent and/or registered office add gent and/or the new registered office address here: 	ress on our records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida,
	Cite Zin 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 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
MGR	Brittney Evans	2725 Botts Landing Rd	□Add
		DeLand, FL 32720	□ Remove
			= Change
MGR	Courtney Powell	848 Aurora Way	□Add
		Oldsmar, FL 34677	□ Remove
MGR	Jackalyn Powell	848 Aurora Way	□ Add
	•	Oldsmar, FL 34677	\ _Remove
	•		
			□ Remove
			Change
	b		□Add
			Remove
			□Change
	·		□Add
			□Remove
			□ Change

Powell from CEO to MGR (ov	wners).			
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ective date, if other than the ceffective date is listed, the date must e: If the date inserted in this bloument's effective date on the De	be specific and cannot be prior ock does not meet the applic	to date of filing or mor table statutory filing		
cord specifies a delayed effective s filed.	date, but not an effective ti	ime, at 12:01 a.m. on	the earlier of: (b) The 90	th day after th
October 18 ed	2023		•	
1.4	Signature of a member or auth	· ·		