## 123000536074

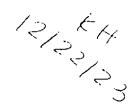
(Requestor's Name)
(Address)
(Address)
•
(City/State/Zip/Phone #)
(Only/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400420161844

12/11/28--01085--003 ++25.00



Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Talfahassee, FL 32314

December 7, 2023

To Whom it May Concern:

Please change the Titles for Christy Sadler and Carrie Meek from "MGR" to "AMBR".

Thank you so much.

Sinceres

Christy Sadler Managing Partner

Anchor Peabody

790 Andrews Avenue

E-103

Delray Beach, FL 33483

203-249-2835

## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Co	orporations					
SUBJECT: Au	CHOR PEABODY F	INMICIAL SERVICES,	LCC			
	Name of Lit	nited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.				
Please return all corresp	oondence concerning this matter	r to the following:				
	_ CHRIS	Name of Person				
	ANGHE	Firm/Company				
		Firm/Company				
	790 ANDREWS	AUEUDE E-103				
		AUENUE, E-103				
	DELOAN TO	WAU E) 22403	<b>7</b>			
	<u></u>	City/State and Zip Code	3 2025 E	,		
				!		
	E-mail address: (	ANCHOR PEABODY. LOW	ification)	•		
For further information	concerning this matter, please c	all:	77.	•		
(4015TV C	CANTO	7119	-2935 E	`.		
CHRISTY S	of Person	at ( <u>203</u> ) <u>249</u> Area Code Daytin	ne Telephone Number			
Enclosed is a check for t	the following amount:					
\$25.00 Filing Fee	☐ \$30.00 Filing Fee &	Control of the contro	<u></u>			
w 323.00 Tilling 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 Addre		Street Address:				
Registration Section Division of Corporations		Registration Section				
P.O. Box 632		Division of Cor The Centre of T	-			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ANCHOR PEABODY FINANCIAL SERVICES, LLC

( <u>Name of the Limited Lia</u> (À Flo	bility Company as it now appears on our rida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability	y Company were filed on 12/04	2023 and assigned
Florida document number <u>L230005360</u>	<u>14</u> .	
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I	imited Liability Company," the designation	"LLC" or the abbreviation "L.I.,C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		177
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, <u>e</u>	nter the name of the new registere
and of the new registered write address nere	<u>:</u>	T I
Name of New Registered Agent:		22
New Registered Office Address:		· m 7
	Enter Florida street a	uddress
		_, 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 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>1</u>	Type of Action
	<del></del>	<del></del>	_ □Add
			_ □Remove
			_ □Change
			_□Add
			_ 🗆 Remove
			_ 🗆 Change
<u>_</u>	<del></del>		_ 🗆 Add
			_ □Remove
			ا ما
	<del></del>		DAdd T.
			☐Remove <sup>t</sup> ☐Change
			_ □Remove
			_ □Change
<del></del>			_□Add
			□Remove
			_ 🗆 Change

		: THE	TITLE	FOR	CHRISTY	SADLER
FROM	"MGR"	TO '	"AMBR"			
PLEASE	CHANGE	THE	TITLE	FOR	CARRIE	MEEK
FROM	"MGR"	To	AMBR"			
<del></del>						
<del></del>	<del></del>	<del></del> -				
<u> </u>		<u>-</u>				
<u> </u>						
					<del></del>	
	•		\**		·-	
<del></del>		<u>.</u>				1023
						- · · · · · · · · · · · · · · · · · · ·
		<del></del>	-1.2	<del></del>	<u>.</u>	-07
ive date, if ot	her than the da	te of filing:			(or	otional)
If the date inse	ed, the date must be erted in this block date on the Depar	does not me	et the applicabl	date of filing or e statutory fil	more man 90 days ar	ter filing.) Pursuant to 66 his date will not be lis
d specifies a de	elayed effective da	te, but not a	n effective time	, at 12:01 a.n	i. on the earlier of:	(b) The 90th day aft
N	~ 1+W					
DECEMB	7842 7	·+ //	<u>2023</u>			
	Sign	alure of a me	mber or authoriz	ed renresentati	ve of a member	
	1	1				