# L24000004384

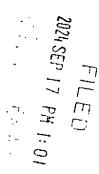
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer
J. HORNE SEP 2 3 2024

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09/17/24--01005--007 \*\*60.00



Date: 7-26-2024

Re: Articles of Organization

My name is Kristin Rundles. The phone number is I would like to amend the Articles of Organization. The name of the new LLC is The Prisoner Press, LLC. I have enclosed a check for \$60.00 in payment of the \$25.00 filing fee, \$30.00 certified copy, and \$5.00 Certificate of Status.

The former name of the LLC was Millionaire Prisoner LLC.

Please don't hesitate to call me with any questions at 267-386-5189.

Thank you,

Kristin Rundles

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: The Prisoner Press LLC
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:
Kristin Rundles
Name of Person
The Prisoner Press LLC Firm/Company
100 S. Belcher Rd., Po Box 6053
Clear water FL 34683
2673865189 K @ amail. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (267) 386-5189  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Solon Filing Fee & Certificate of Status}\$\$ \text{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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Millionaire Prisoner	rilc Est
(A Florida Limited	nany as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000004384</u>	y were filed on 12-21-2053 and assigned.
This amendment is submitted to amend the following:	•
A. If amending name, enter the new name of the limited liab  The Prisoner Press  The new name must be distinguishable and contain the words "Limited Liabi	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)	Same address as before) Loo J. Bolcher Rd., Au Box 6053 Clearwater, FL 34685
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
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:	<u> </u>

#### N

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

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
			□Add
			Remove
			□Change
			□ Add
			□Remove
			Change
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			[]Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ffect	ive date, if other than the date of filing: (optional)
ote:	fective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
cun	nent's effective date on the Department of State's records.
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is fi	led.
د ـ ه ـ	July 26 7524
ated	July 26, 2024,
	tustin kundles
	▼ //· \
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: The Prisoner Press LLC  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:
Kristin Rundles
The Prisoner Press LLC Firm/Company
100 S. Relcher Rd., Po Box 6053
Clear unter FL 34683
2673865189 K @ a mail . Com  E-mail address: (to be used for surfure annual report notification)
For further information concerning this matter, please call:
Name of Person at 267 386-5189  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Certificate of Status & Certificate of Status

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Millionaire Prisone	
(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L24000004384</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	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)	Same address as before  Los J. Rolcher Rd., Au Box 6053  Clearwater FL 34685
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, enter the name of the new registered
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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
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D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	/ H = 1/
(If an effe <u>Note:</u>	tive date, if other than the date of filing: (optional) (optional) (ctive 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) f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the int's effective date on the Department of State's records.
f the record ecord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	July 26, 2024.
	Signature of a member or authorized representative of a member
	KRISTIN RWOLES  Typed or printed name of signee