L24 0000030730

	(Requestor's Name)
	(Address)
	(-5-11)
· · - · <u>- · - · · · · · · · · · · · · ·</u>	(Address)
	(City/State/Zip/Phone #)
	(ON) ORDER HORE #)
PICK-UF	wait Mail
	(Business Entity Name)
	(Cosmos Circly Halle)
·	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

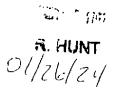
Office Use Only



500422520935



RECEIVED
2024 JAN 25 PH 3: 07



23'30 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624	
PLEASE USE FUNDS FROM THI AUTHORIZATION SIGNATURE: Mack Realty Ventures, LLC BUSINESS	
Walk in	Pick up time
Mail out	Will wait
Certified copy of articles Certificate of Status	AMMENDMENTS AH ID: 07
Profit Not for Profit Limited Liability Domestication Other CORP	AMMENDMENTS X Amendment Resignation of R.A. Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger Conversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing Limited Partnership Reinstatement
APOSTIL ()	Other
EVAMINED'S INITIALS:	

FLORIDA CAPITAL COURIER SERVICES, INC

COVER LETTER

TO: Registration : Division of Co				
Mack Res	alty Ventures, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	condence concerning this matter	to the following:		
	Ronald Mack			
		Name of Person		
		Firm/Company	`	
	6960 Grande Vista Way S	5	·	
	-	Address	Signal Si	# ·:
	South Pasadena, FL 3370	7	E. F.	AH 10: 07
	rmack@bold.legal	City/State and Zip Code	m	07
For further information	E-mail address: concerning this matter, please of	(to be used for future annual report notifica	ition)	
Ronald Mack	concerning and matter, prease c	720 757-2461		
Name	of Person	at () Area Code Daytime T	elephone Number	
Enclosed is a check for	the following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate o Certified Co (additional cop)	of Status &
Malling Addre Registration Division of 6 P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corpo The Centre of Tall 2415 N. Monroe S Tallahassee, FL 32	rations lahassee Street, Suite 810	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company a (A Florida Limited Liabi	s it now appears on our records.) lity Company)
The Articles of Organization for this Limited Liability Company were Florida document number L24000030730	re filed on January 16, 2024 and assigned
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 C	Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
_	
Enter new mailing address, if applicable:	တိုင်း 🤧 👯
(Mailing address MAY BE A POST OFFICE BOX)	ma G Fry
	ATE 0
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:	ress on our records, enter the name of the new reg
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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address Lassonde Studios	Type of Action
AMBR	Jack V. Herick	1701 Student Life Way Salt Lake City, UT 8411	2 ■Add
			□Remove
			□ Change
			□Add
			□ Remove
			Change
····		<u> </u>	Add
			□Remove
		E S	☐ □Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			Change

				· · · · · · · · · · · · · · · · · · ·	
	<u> </u>				
					
					_
				Ps.3	
			· · · ·	<u>,∓</u> % 	
			\	7.	
		 -	<u></u> 000	<u>(1)</u>	• -
			TE'S	AHI	(= m =
			FLE	0: 08	exiv.
		_			
		•			
			<u> </u>		
				-	
ective date, if other than the date of filing:			(optional	n.	
effective date is listed, the date must be specific and canno te: If the date inserted in this block does not meet the	t be prior to date of	filing or more than 9	0 days after filin	g.) Pursu	ant to 605.0
nument's effective date on the Department of State's	records.	atory mang require	mens, uns gat	e will li	ot de listen
and an iC and delicated off attacks to the second of the s		201 45	-UE-dly m	4 00.1	
cord specifies a delayed effective date, but not an eff s filed.	ecuve time, at 12	2:01 a.m. on the ca	rner or; (b) I	ne yuu	day after t
January 26 202	4				
ed	·				
· · · //					
Signature of a member	>				