2/29/24, 4:38 PM

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAX ZONE INC. Account Number : 120190000044 Phone : (407)888-3131

Fax Number

: (888)453-2529

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PEACE ON PURPOSE MOVEMENT LLC

Certificate of Status	0
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Page Count	07
Estimated Charge	\$25.00

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Help

Tallahassec, FL 32314

COVER LETTER

TO: Registration S Division of Co						
	N PURPOSE MOVEMENT L	LC				
SUBJECT: Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sul	binitted for filling.				
Please return all corresp	ordence concerning this matter	to the following:				
	ED KOTLER					
		Name of Person				
	TAX ZONE INC					
		Fimi/Company				
	8865 COMMODITY CIR	STE 4				
		Address				
	ORLANDO, FL 32819					
		City/State and Zip Code				
	ACCOUNTANT@TAXZO	ONEFL.COM to be used for future annual report not	tication			
For further information of	concerning this matter, please o	•	arcanoli,			
ED KOTLER		407 888-3131				
Name o	f Person	at ()	e Telephone Number			
Enclosed is a check for the	te following amount:					
○ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addres		Street Address:	-#:			
Registration S Division of C		Registration Sc Division of Cor				
P.O. Box 6327			The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PEACE ON PURPOSE MOVEMENT LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 02/21/2024 _ 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 Company," the designation "LLC" or the abbreviation "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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida 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

Title	Name	Address	Type of Action	•
AMBR	MEGIN DAVIDSON	3329 SCHOOLHOUSE RD		
		ST CLOUD, FL 34773	Remove	
			DChange	
AMBR	BILLA, MACY	3329 SCHOOLHOUSE RD	□Add	
		ST CLOUD, FL 34773	≅Remove	
			□Change	
			□Remove •	•
			□ Change	
			□Add	
			□Remove	
			□Change	
		4.4	ÜAdd	
			□Remove	
			☐ Change	
			□ Remove	•
			Change	

From: Tax Zone

Typed or printed name of signed