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## **COVER LETTER**

TO: Registration Section

Division of Cor	porations		
	Solutions 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:	
	Jonathan Darrell Newkir	t	
		Name of Person	
	Lions Den Solutions LLC		
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	200 South Andrews Ave	set 504	
		Address	
	Fort Lauderdale, FL 333	01	
	<del></del>	City/State and Zip Code	
	jonnewkirt@gmail.com		
	E-mail address: (	to be used for future annual report no	otification)
For further information c	oncerning this matter, please c	all;	
Jonathan Darrell Newk	iirt	954 465-0442	
Name o	f Person		me Telephone Number
Enclosed is a check for the	ne 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)
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, 1	Section forporations 7	Street Address: Registration S Division of Co The Centre of 2415 N. Mont Tallahassee, F	orporations Tallahassee oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lions Den Solutions LLC		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company	were filed on <u>2/26/24</u>	and assigned
lorida document number L24000099741		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:		22 <u> </u>
Principal office address MUST BE A STREET ADDRESS)		A
		第二里 二
Inter new mailing address, if applicable:		The F
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	ime of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
<del></del>	City	7in 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	Type of Action
AMBR	Jonathan Darrell Newkirt	515 SW 72nd Ter, North Lauderdale, 33068	
			□ Remove
			□Change
			🗆 Add
			□ Remove
			□Change
			□ Add
		<del>- ,</del>	□Remove
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		Remove	
			□Change
			□Add
			□ Remove
			□ Change

D. If amending any other infor	nation, enter change(s) here: (A	Attach additional sheets, if necessar	v.)
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. Effective date, if other than to (If an effective date is listed, the date Note: If the date inserted in this document's effective date on the	block does not meet the applicable s	(optional) te of filing or more than 90 days after filing statutory filing requirements, this date	.) Pursuant to 605.0207 (3) will not be listed as the
the record specifies a delayed effectord is filed.	tive date, but not an effective time, a	at 12:01 a.m. on the earlier of: (b) Th	ne 90th day after the
Dated March 7	2024		
	Conthan Lewhiel		
<del></del>	Signature of a member or authorized	representative of a member	
Jonathan Darrell Ne	ewkirt		
	Typed or printed nar	ne of signee	