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## **COVER LETTER**

FO: Registration So Division of Cor			•				
	HOLDCO LLC 4						
SUBJECT:	Name of Lii	nited Liability Company					
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.					
Please return all correspo	ondence concerning this matte	r to the following:					
	Hampton Tanner						
	<u></u>	Name of Person					
	ASCEND HOLDCO LLC	2					
		Firm:Company	·				
50 Beachwood							
		Address					
	Fernandina Beach, FL 32	034					
	hamptontanner l l@gmail.c	City/State and Zip Code	<del></del>				
	E-mail address:	(to be used for future annual report not	tification)				
For further information e	concerning this matter, please	call;					
Leslie Cutahar		904 624.0187					
Name o	f Person	Area Code Daytir	ne Telephone Number				
linelosed is a check for the	he 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Address		Street Address:	action				
Registration Section Division of Corporations			Registration Section Division of Corporations				
P.O. Box 632 Tallahassee,		The Centre of					
rananassee, .	にし ジムノーサ	2410 N. MOIIIC	oe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ASCEND HOLDCO 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 March 06.2024 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 "L.L.C." 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 City

## 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>	<u>Name</u>	Address	Type of Action
MGR	Leslie M. Cutajar	50 Beachwood Rd	
		Pinecrest, FL 33138	■Remove
			□Change
MGR Ham	Hampton M. Tanner	50 Beachwood Rd	■Add
		Fernandina Beach, F1, 32034	∐Remove
			⊖Add
			∐Remove
			Change
<u></u>		<del></del>	□Add
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ective date, if other that effective date is listed, the da	n the date of filing	:	(iling or prore than 90 days a	otional) fter filing.) Pursuam to 605.020
<u>e:</u> If the date inserted in t	ns block does not m	eet the applicable state	tory filing requirements.	this date will not be listed a
ument's effective date on	ine Department of St	ate's records.		
cord specifies a delayed ef	fective date but not :	m effective time, at 12	:01 a.m. on the earlier of	: (b) The 90th day after th
s filed.		crreetire time, at 12	isor with on the carrier of	(v) The 70th day after the
Vocil 20		2024		
ed April 30	<u> </u>	2024		
	Hame	ston H. Tanner	dofforp will ed 54/30/24 1,57 FM EDT 737-71 GH3/8V-60IY	
	Signature of a m	ember or authorized repr	esentative of a member	