## L24000143187

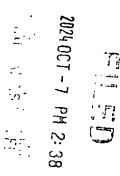
(	Requestor's Name)
(	Address)
(	Address)
(	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(	Business Entity Name)
(	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
<u> </u>	

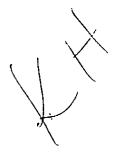




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10/07/24--01024--018 \*\*25.00





## **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations			
SUBJECT: P2+10 (V) Name of Limit	ted Liability Company		
The enclosed Articles of Amendment and fee(s) are subn	nitted for filing.		
Please return all correspondence concerning this matter to	o the following:		
<u> </u>	Name of Person		
Better	Fim/Company		
3424	Malbry Pd	, <u>-</u>	
Vernor	FL 32462 CityState and Zip Code be used for future annual report notified	*	
E-mail address: (to	b be used for future annual report not in	heation) (OVV)	
For further information concerning this matter, please ca			
Name of Person	at ( <u>ESS</u> ) <u>3) (c</u> Area Code Daytime	e Telephone Number	
Enclosed is a check for the following amount:			
\$25.00 Filing Fee S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & 1 Certified Copy, - 1 (additional copy is enclosed)	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroo Tallahassee, FL	porations Callahassee e Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BETTER CALL HALL LLC		
(Name of the Limited Liability Compa- (A Florida Limited I.	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.24000143187	were filed on 03/25/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company." the designation "LLC" or the abb	reviation "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)	3424 mallor renon +1,	- V Rd
B. If amending the registered agent and/or registered office a 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:	<u> </u>	
New Registered Office Address:	Enter Florida street address	7
	, Florida	PH
	City	Zip Code

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.

New Registered Agent's Signature, if changing 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
VP	HALL, CIERRA	4053 CALF ISLAND LN	□ Add
		CARYVILLE, FL 32427	≣Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			CRemove
			[]Change
			□ Remove
			Add PH 2200ve
			☐ ☐ ☐ ☐ Remove Series ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			□Remove
			□Change

Removing VP Cierra Hall fro	om Better Call Hall LLC	She	de 1	xt_	
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by Peach	Frain	bosic	Seci	retar of	
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		-			2024
Effective date, if other than the (If an effective date is listed, the date mus	date of filing:	mains to dots of Gline o	e many than 00 day	(optional)	
Note: If the date inserted in this blo	ock does not meet the a	pplicable statutory fi	lling requirement	ts, this date will not b	e listed as
document's effective date on the De	epartment of State siec	ords.			PH
ne record specifies a delayed effective ord is filed.	e date, but not an effect	ive time, at 12:01 a.s	m. on the earlier	of: (b) The 90th da	> y after the &
Dated September 27	2024				
	1/23 0- /				
<del></del>	Signature of a member of	authorized representat	ive of a member		
Jesse Hall				•	
	Typed or	printed name of signe	<u> </u>		_

Filing Fee: \$25.00