

L24000198899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

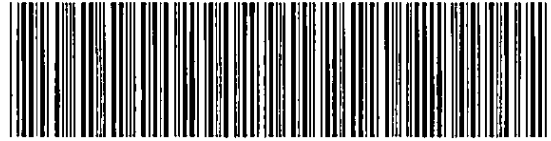
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

NOB
5-10

Office Use Only



500428284705

500428284705
05/13/24--01023--012 **25.00

FILED

2024 MAY 10 AM 11:20

SECRETARY OF STATE
MAIL ROOM

Amend.

JUN 07 2024

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOWING SEEDS BOOKS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WILLIAM HARAMIS

Name of Person

SOWING SEEDS BOOKS LLC

Firm/Company

3861 SW BIMINI CIRCLE N

Address

PALM CITY FLORIDA 34990

City/State and Zip Code

Bmero75@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIAM HARAMIS

516

410-6555

at ()

Name of Person

Area Code

Daytime Telephone 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 Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL

2024 MAY 10 AM 11:20

FILED

1/68



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 29, 2024

WILLIAM HARAMIS
3861 SW BIMINI CIRCLE N
PLAM CITY, FL 34990

SUBJECT: SOWING SEEDS BOOKS LLC
Ref. Number: L24000198899

We have received your document for SOWING SEEDS BOOKS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 624A00011659

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SOWING SEEDS BOOKS 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 April 29, 2024 and assigned
Florida document number L24000198899.

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

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

FILED
2024 MAY 10 PM 11:20
SECRETARY OF STATE
TALLAHASSEE, FL

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

William Harris
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00