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COVER LETTER

TO: Registration Section Division of Corporations

SOWING SEEDS BOOKS LLC SUBJECT:

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)

at (_

For further information concerning this matter, please call:

WILLIAM HARAMIS

Name of Person

516 410-6555 Area Code Daytime Telephone Number

Enclosed is a check for the 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 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

Nht

SOWING SEEDS BOOKS LLC (Name of the Limited Liability Company as it now appears on do Tecority. (A Florida Limited Liability Company were filed on April 29.2024 . Introduction for this Limited Liability Company were filed on April 29.2024 . Iorida 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: he new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreche address MUST BE A STREET ADDRESS) Center new mailing address, if applicable: Principal office address, if applicable: Mailing address, if applicable:	
The Articles of Organization for this Limited Liability Company were filed on April 29,2024. Iorida 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 abbrechter new principal offices address, if applicable: Principal office address, if applicable: Principal office address, if applicable: Mailing address, if applicable: Mailing address, if applicable: Mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) S. If amending the registered agent and/or registered office address on our records, enter the name agent and/or the new registered office address here: Name of New Registered Agent:	#12:-5 3
A. If amending name, <u>enter the new name of the limited liability company here</u> : be new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbre Criter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Criter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) S. If amending the registered agent and/or registered office address on our records, <u>enter the name gent and/or the new registered office address here</u> : Name of New Registered Agent:	
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Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS) Cater 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 gent and/or the new registered office address here: Name of New Registered Agent:	breviation "L.L.C."
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u> B. If amending the registered agent and/or registered office address on our records, <u>enter the name gent and/or the new registered office address here</u> : <u>Name of New Registered Agent</u> :	
Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, <u>enter the name gent and/or the new registered office address here</u> : <u>Name of New Registered Agent</u> :	
Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, <u>enter the name gent and/or the new registered office address here</u> : <u>Name of New Registered Agent</u> :	
gent and/or the new registered office address here: Name of New Registered Agent:	
	e of the <u>new</u> regi
Nam Basistanad Office Addresse	
New Registered Office Address.	

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.

Cin

Florida _

Zip Code

 If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

· ·

MGR = Manager AMBR = Authorized Member

,

<u>Title</u>	Name	Address	Type of Action
MGRM	Luca Haramis	3861 SW Bimini Circle N Palm City FI 34990	🗮 Add
			Change
			🗆 Add
			[]Remove
			□Change
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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.

Dated April 29.	. 2024
<u>\</u>	Signature of a member or authorized representative of a member
WILLIAM HARAM	IS

Typed or printed name of signee

Filing Fee: \$25.00



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

