Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

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ä

Account Name : INC AUTHORITY, LLC

Account Number : 120240000004 Phone : (775)329-7721

Fax Number : (775)376-9207

*Enger the email address for this business entity to be used for future ு approval report mailings. Enter only one email address please.**

islandangelsllc@gmail.com ...Email Address:

台LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ISLAND ANGELS, LLC

Certificate of Status	0
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JUN 26 2024

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Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO

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			ISLAND ANGELS, LLC	TALLAHASSEE FLURIDA
_		(Name of the Lin	Sted Liability Company as it now appears on our reco (A Florida Limited Liability Company)	rds.) (E. 51/1/2/)
Ner En	124		(A Florida Limited Ciability Company)	CORID/
•	orticles of Organ	vization for this Limited	Liability Company were filed on 04/30/24	and assigned
Florid	la document nur	nber L24000200993		
This a	imendment is su	ibmitted to amend the fo	llowing:	
	··		CAL Muster d Va Miller	
А, П	amending han	ie, <u>enter the new name</u>	of the limited liability company here:	
The nev	w name filist be di	stinguishable and contain the	words "Limited Liability Company," the designation "Li	.C" or the abbreviation "L.L.C."
Enter	new principal	offices address, if appl	icable:	***************************************
(Princ	cipal office add	ress MUST BE A STRE	(ET ADDRESS)	
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			d/or registered office address on our recor	ds, enter the name of the new
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	Name of Ne	w Registered Agent:		
;	New Regist	ered Office Address:		
			Enter Florida street addi	.622
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			City	Zip Code
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New Registered Agent's Signature, if changing Registered Agent:

3 1 76 5

The

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

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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>U_</u>

<u>Title</u> M(Name	Address	Type of Action
MGR		Kathryn Stokes	900.9Th Ave East Lot 42	D Add
			Palmetto, FL 34221	☑ Remove
				Change
MGR	_	Eden Beverley	900 9Th Ave East Lot 42	□ Add
			Palmetto, FL 34221	■ Remove
				□ Change
MGR	- ,	Ryan Beverley	900 9Th Ave East Lot 42	D Add
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	MGR Ryan Boverley is listed twice. Please remove the second/duplicate	
	entry for MGR Ryan Baverlay.	
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Next	tive date, if other than the date of filing: N/A (optional) flective 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 605.00 [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed meet's effective date on the Department of State's records.	207 (3)(as the
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier a 90th day after the record is filed.	of:
, "	e sour day after the record is med.	
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Date	· /	
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	Separature of Separature of Separatured representative of a member	

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