



Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations	
Division of Corporations  SECT: Miles Life LLC Name of Limited Liability Company  enclosed Articles of Amendment and fee(s) are submitted for filing.  se return all correspondence concerning this matter to the following:  Michele Selon Miles Name of Person  Miles Life LCC Firm/Company  D440 Monte Cristo Way Address  Sanford FL 33771 City/State and Zip Code Micheley Light C quail Com E-mail address: (to be used for future applied report notification)  further information concerning this matter, please call:  Michele S. Miles at (407) 781 - 7744 Area Code Daytime Telephone Number	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Michele Selon Miles	
Miles Life LLC Firm/Company	
D460 Monte Cristo Way	
E-mail address: (td be used for future annual report notification)	
For further information concerning this matter, please call:	
Michele S. Miles at (407) 781 - 7714  Name of Person Area Code Daytime Telephone Number	<del></del>
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certifica (additional copy is enclosed) Certified	te of Status & Copy

## MAILING ADDRESS:

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

## STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company	ny as it now appears of its disability Company) were filed on			
Florida document number <u>L24000 21566</u> .				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here	e:		
		-		
he new name must be distinguishable and contain the words "Limited Liabili	ity Company," the des	ignation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)		20 <b>24</b>		
		₹ 23 F		
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>			
		<u> </u>		
3. If amending the registered agent and/or registered of	fice address on a	our records enter the name of the n		
registered agent and/or the new registered office address here		our records, check the hance of the h		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, Florida		
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code		

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

AP = Authorized Person

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michele Solon Miles	2460 Monte Cristo Way	Ø Add
		Sanford, Fr 32771	□ Remove
			Change
AP	Richard Anthony	2460 Monte Cristo wa	<b>√</b> □ Add
	Miles	2440 Monte Cristo was Sanford, FL 32771	□ Remove
			Change
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an effectiv lote: If th	e date is listed, the che date inserted in		d cannot be prior to meet the applicable			nal) iling.) Pursuant to 605. date will not be liste	
e record The 90	d specifies a de th day after th	elayed effective ne record is filed	date, but not a	an effective ti	me, at 12:01 a.	m. on the earlie	er of
ated	May	-	,13				
		MA	Will				
		Signum of a	member or authori	ed representative (	f a member		
		Michele	5 1.	1001			

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Filing Fee: \$25.00