

## L24000219672

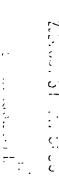
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Spoke with Mos. Gaskin 3
She advised the only changer
requested at this time is to add "Jz" to MR. Hetcher's
add "J2" to MR. Hetcher's
Mame. 10/31 TOA, 2980 Vill.

Office Use Only



500437303945

09/30/24--01013--023 \*\*25.00



## Docusign Envelope ID: F58E4D5B-B0FE-43BF-B659-DAAA59DAD9CE COVER LETTER

TO:	Registration Sec Division of Corp			•
SUBJEC	ு ு⊤∙ Beyond The	Horizon Publishers, LLC		
300017		Name of Lim	ited Liability Company	
The encl	losed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspor	ndence concerning this matter	to the following:	
			Amy K. Gaskin	
			Name of Person	<u> </u>
			BEYOND THE HORIZON PUBLISHERS, L	.LC
			Firm/Company	
			16809 La Mota Way	
			Address	
			Winter Garden	
			City/State and Zip Code Florida 34787	
		E-mail address: (	to be used for future annual report not	ification)
For furth	er information co	oncerning this matter, please co	all:	
	Amy K. Gaski	in	at (603 686-2233	3
	Name of	Person		ne Telephone Number
Enclosed	is a check for the	e following amount:		
<b>5√</b> \$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	<u>:</u>	Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Docusign Envelope ID: F58E4D5B-B0FE-43BF-B659-DAAA59DAD9CE

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liabilit (A Florida	y Company as it now appears on our Limited Liability Company)	records.)	<del></del>				
The Articles of Organization for this Limited Liability Co Florida document number L24000219672	ompany were filed on 05/10/24		and assigned				
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limit	ted liability company here:						
The new name must be distinguishable and contain the words "Limit	ted Liability 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 ADDR	ESS)	- t	i.				
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		•	٥)				
Enter new mailing address, if applicable:			-,				
Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	(1,				
DE TATEL BON	<del></del>		( ) ( )				
3. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records,	enter the name	of the new regis				
Name of New Registered Agent:							
New Registered Office Address:							
	Enter Florida street	address					
		_, Florida					
	City		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.

n amending Authorized rerson(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
Ms .	Amy Kristen Gaskin	16809 La Mota Way Winter Garden, FL 347	87 □Add
	341.		□Remove
	MER		□Change
Mr.	Charles Aaron Gaskin	16809 La Mota Way Winter Garden, FL 34787	D Change
	33,		C/Add
	33. AMBR		□Remove
Mr.			Change
	James Coleman Fletcher, Jr.	16809 La Mota Way Winter Garden, FL 3478	7 □ Add
	331 AMBR		□Remove
			_ Change
			_ 🗆 Add
			□Remove
			_ Change
	<u></u>		_ □Add
			_ □Remove
			□Change
·			_ □Add
			_ □Remove
			□Change

	of this form is to	make sure that th	e address for char	<del>les</del>
<u>license: sa</u>	<u>ne with </u> James Colem	h his phyical addr man Fletcher, Jr (a	s his ir. was omit	ed and
doesnt matc	h license). Amy's l	license also spells n in order to open	out Kristen as he	r middle
	TICCOS EO ATT MACCI	The order to open	a business bank ac	Count.
We all	(es. Le 16809	La Moto Way	W. ntv Gad	en, Fc
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ffective date, if other an effective date is listed, t	he date must be specific and	i cannior de boor lo date or i	ling or more than 00 days.	Por filing ) Dummer to 605 0202
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