## L24000291631

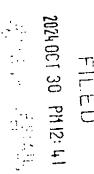
(F	Requestor's Name)
(A	address)
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(C	City/State/Zip/Phone #)
PICK-UP	MAIL MAIL
(B	Business Entity Name)
(C	Pocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
	J. HORNE
	NOV 2 0 2024

Office Use Only



800438667998

10/29/24--01008--022 \*\*525.00



## **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT: APPAREI	NT LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Andrew Pierce		
		Name of Person	
	Cindy's Florida LLC		
		Firm/Company	
	8051 N. Tamiami Trail S	STE E6	
		Address	
	Sarasota, Florida, 3424	3	
	···	City/State and Zip Code	<u> </u>
	reports@cloudpeaklaw.c		
	E-mail address: (	to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	
Andrew Pierce		307 683-0983	
Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is a check for the	he 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)
<u>Mailing Addres</u> Registration		Street Address: Registration S	ection
Division of C	Corporations	Division of Co	orporations
P.O. Box 632		The Centre of	Tallahassee oe Street, Suite 810
Tallahassee,	rl 32314	2410 IV. WIOHI	or succe, suite ore

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF

2024 OCT 30 PH 12: 41

A	PPARENT LLC	,	FRIMI
(Name of the Limited Lin (A Flo	ability Company as it now appear orida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability	ty Company were filed on	06/27/2024	and assigned
Florida document number1.24000291631	<del></del>		
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company he	ere:	
APPARENT POWER LLC			
The new name must be distinguishable and contain the words "	'Limited Liability Company," the d	lesignation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	ODRESS)		
	<del>-</del>		
man and the state of the state			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or regist	ered office address on our r	ecords, enter the na	ne of the new registered
agent and/or the new registered office address he		<u> </u>	
Name of New Registered Agent:			
New Registered Office Address:	Foter Flo.	rida street address	
_	City	, Florida _	Zip Code
	•		ing com
New Registered Agent's Signature, if changing Regis			
I hereby accept the appointment as registered ag provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regist company has been notified in writing of this change	nd complete performance of ed agent as provided for in ( stered office address, I herei	fmy duties, and Lam Chapter 605, F.S. Oi	familiar with and r, if this document is

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
AMBR =	<b>Authorized Member</b>

<u>Title</u>	Name	Address	Type of Action
			□ Remove
			☐Change
			П <b>ето</b> ve
			☐ Change
			□Add
			□ Add
			Remove
			☐ Change
			□ Add
			Remove
			Change
<del></del>			□Add
			□ Remove
			□Change

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Filing Fee: \$25.00