

L24000328287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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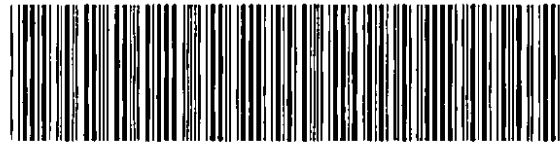
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hamilton Dry Needlings LLC
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:

Tyler Hamilton
Name of Person

Hamilton Dry Needling LLC
Firm/Company

681 Goodlette-Frank RD N Unit 230
Address

Naples FL 34102
City/State and Zip Code

tlhamilton1997@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tyler Hamilton at (920) 562 9250
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

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

SECRETARY OF STATE
TALLAHASSEE, FL

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Hamilton Dry Needling LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 7-24-24 and assigned Florida document number 124000329297.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Same name
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

661 Goodlette-Frank Rd N
Unit 230
Naples, FL, 34102

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

661 Goodlette-Frank Rd N
Unit 230
Naples, FL 34102

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Tyler Hamilton

New Registered Office Address:

661 Goodlette-Frank Rd N Unit 230
Enter Florida street address

Naples, Florida 34102
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.

Tyler Hamilton
If Changing Registered Agent, Signature of New Registered Agent

→ same agent
as before

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☐ move
☐ change
☒

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SECRETARY OF STATE
TALLAHASSEE, FL

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 10-14-24.

- change as soon as possible

Tyler Hamilton
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FL

THE

Filing Fee: \$25.00