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(Document Number)

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08/29/24--01008--008 **25.00

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: SOMETHING LIKE THAT 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:

ANGELA M HAYWARD
Name of Person

SOMETHING LIKE THAT LLC
Firm/Company

6090 N BLUE BREAM TER
Address

HERNANDO FL 34442
City/State and Zip Code

angelahayward2018@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT LEE HAYWARD at (352) 699-4665
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SOMETHING LIKE THAT 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 7/29/2024 and assigned Florida document number L24000333970.

This amendment is submitted to amend the following:

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

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)

ANGELA M HAYWARD
6090 N BLUE BREAM TER
HERNANDO , FL 34442

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

6090 N BLUE BREAM TER
HERNANDO , FL 34442

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: _____

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.

_____
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 = Authorized Member

Title	Name	Address	Type of Action
OWNER AMBR	ANGELA M HAYWARD	6090 N BLUE BREAM TER HERNANDO,FL 34442	■Add
			☐Remove
			☐Change
OFFICE MGR	ROBERT L HAYWARD	6090 N BLUE BREAM TER HERNANDO FL 34442	■Add
			☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

We have changed the information due to Sunshine Coporate filings LLC"s failure by there registed agent to file the correct information we have added the principle agent and corrected the mailing address and principle address. to our address not the Registered agents

we will replace the registerd agent next May 2025 SRA

as a result of the registered agent not listing a prinicple agent we were delayed in openinng the business becase we needed a additional lic from the county that we could not get as a result of the errors by the registered agent

thank you please correct as soon as possible so we can retun to the county Citrus florida and get that lic

E. Effective date, if other than the date of filing: 08/20/2024 **(optional)**

(If an effective 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 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 8/23/2024 . .

x Angela Hayward
Signature of a member or authorized representative of a member

x Angela Hayward
Typed or printed name of signee

Filing Fee: $25.00