

L24000344131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

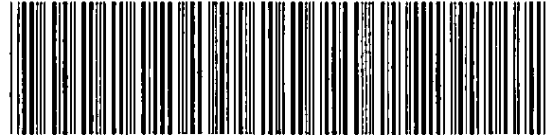
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Free Amendment due to
clerical error. 8/30/24

Office Use Only



400433800764

FILED
2024 AUG 31 PM 4:12
CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Profit Partners, 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:

Daymon Medina
Name of Person
DML Partners, LLC
Firm/Company
2328 Spring Hollow Loop
Address
Wesley Chapel, FL 33544
City/State and Zip Code
dmedina2552@outlook.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daymon Medina at (813) 205-0288
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Profit Partners, LLC

If Changing Registered Agent, Signature of New Registered Agent

STATE OF MISSISSIPPI
COUNTY OF HARRIS

2024 AUG 30 PM 4:13
FLYOD: STATE
SIOUX FALLS, SD
SIOUX FALLS, SD

11

(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)

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 August 30, 2024

Signature of a member or authorized representative of a member

DAYMON Medina
Typed or printed name of signer

Filing Fee: \$25.00

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

[illegible]