L24000389151

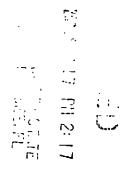
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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State of Florida Department of State

I certify from the records of this office that FILET OF SOUL, LLC, is a limited liability company organized under the laws of the State of Florida, filed electronically on September 05, 2024, effective September 05, 2024.

The document number of this company is L24000389151.

I further certify that said company has paid all fees due this office through December 31, 2024, and its status is active.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

Authentication Code: 240910144808-100434777191#1

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Tenth day of September, 2024

Secretary of State

COVER LETTER

Division of Cor			
SUBJECT:	Filet of S	Soul UC ited Liability Company	
	Po Box 24 Address Tallavast, F. 34240 City/State and Zip Code durvelthampsmarkers. (to be used for future annual report notification) ation concerning this matter, please call: Thompsm at (941) 920-970 Daytine Telephone Number		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Darrell	J. Thompson Name of Person	
	Filet o	of Soul UC Firm/Company	
	durvelthangs	City/State and Zip Code May Livo	ification)
For further information e			
Darrell J. The	mpsm i Person	at (A41) Azo - G	RTO) ne Telephone Number
Enclosed is a check for the	ne following amount:		/
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Address Registration S	Section	Street Address: Registration Se	
Division of C P.O. Box 632	•	Division of Cor The Centre of T	Γallahassee
Tallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Filet of Soul, UC	Tr on our records)		
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	is on our records.		
The Articles of Organization for this Limited Liability Company were filed on $\underline{\underline{\sf Q}}$	eptember 5, noz Yand assigned		
Florida document number <u>L 2400 389151</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability company he	ere:		
The new name must be distinguishable and contain the words "Limited Liability Company," the	decionation "I I C" or the abbreviation "I I C"		
	designation the of the above transfer index.		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	11.5 Z		
B. If amending the registered agent and/or registered office address on our r	records, enter the name of the new regist		
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
4.00			
	, Florida Zip Code		

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Anna-Maria Galvez	8437 Gardens ar. #3	• Add
		8437 Gardens ar. #3 Sarasota, Fr 34243	Remove
			□Change
			□Add
			□Remove
			□Change
			_ ∰ Add
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	·		☐ Change
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ective date, if of	her than the date of	f filing:			(optional)		
effective date is list	ed, the date must be specerted in this block does	ific and cannot be p			ys after filing.)		
	date on the Departme			ming requiremen	no. ono dire		70 113,000
cord specifies a dos	elayed effective date, h	out not an effectiv	e time, at 12:01	a.m. on the earlie	r of: (b) The	90th da	y after
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Filing Fee: \$25.00