## L24000409852

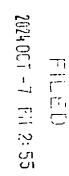
(Requestor's Name)
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J. HORNE
J. HORNE OCT 2 4 2024

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## **COVER LETTER**

TO:

Tallahassee, FL 32314

FO: Registration Division of C			
SUBJECT: Je	remiah's Tree 1 Name of Lim	1 C	
юванет. <u>ос</u>	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
	pondence concerning this matter		
	Dovid	Merrifield Name of Person	
	Jeremi	ah's Tree LLC Firm/Company	
	192 W	Choffin Ave	
	Defuni	ak Springr, FL, 3 City/State and Zip Code	2433
		errifield@ icloud. Co	
For further information	n concerning this matter, please e	all:	
Dovid Me	rrifield of Person	at ( <u><b>850</b></u> ) <u><b>640</b>-</u> Area Code Daytim	7\\7 ne Telephone Number
Enclosed is a check for	r 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 Add		Street Address: Registration Se	etion
Registration	a Section Corporations	Registration Se Division of Co	
P.O. Box 6.	-	The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Vi		200
		4210-
(Name of the Limited Liability Compan (A Florida Limited Li	ee LLC v as it now appears on our	20240 - 1 F. 2. 55
(A Florida Limited Li	ability Company)	· ·
The Articles of Organization for this Limited Liability Company v	vere tiled on <u>Sept.</u>	19,2024 and assigned
Florida document number <u>L24000409852</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<del></del>
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ldress on our records,	enter the name of the new registered
Name of New Registered Agent:		

## New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

\_, Florida \_\_\_

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	David Merrifield	192 w Cheffin A1e	<b>%</b> Add
		Defuniak Springs. FL	□Remove
		32433	□Change
MGR	Merrifield David	192 w Choffin Are	□Add
		Petuniak Springs, FL	
		32433	[]Change
			🗆 Add
			Remove
			□Change
			□Add
			Remove
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change

The first and last name fields were entered back roots in the original filing process. My first name is David.  My lost name is Marifield. I just need that set straight in the authorized persons list and anythere else it applies because it is backword, at the mament and that is presenting me from getting a bank account for the bushess as well as other issues. Thank you!  It date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records.  It the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listent's effective date on the Department of State's records.  It specifies a delayed effective date, but not an effective time, at 12:01 a.m., on the earlier of: (b) The 90th day affiled.  Yell enter 30 2024  Your Manufacility  Signature of a member or authorized representative of a member		d last man	e fields se	re entered b	ock words
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