134000462884

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

Office Use Only



300439772603

SECRETARY OF STATE TALLAHASSEE, FL

COVER LETTER

Registration Section Division of Corporations

JECT: EV	DIVE & Employen	owes Consult I	LIC		٠
nclosed Articles of a	Amendment and fee(s) are subt	nitted for filing.			
e return all correspon	ndence concerning this matter t	to the following:			
	۸ ،				
	Asmandy	Jean			
	T 10/10 0	Name of Person			
	Evolve &	Empower LLC Firm/Company			
	5270 /20	•			
	00 19 LYL)			
	Coconut (LODV FI 330-	12		
		City/State and Zip Code			
	evolveem	POW & CONSULT Of the used for future annual report notific	1669maile	€ 24	
urther information co	oncerning this matter, please ca	·	TALLAHASSEE, Telephone Number	124 NOV 19	2001.
_	11 To 40	Orn 1255	AHAS HAS		-es‴ } }*****
Smand;	9 Jean Person	at (<u>754</u>) <u>638-5</u> Area Code Daytime	Telephone Number	PM 2: 35	i i
	•	·	T S TAT	2: 2:	اخام
osed is a check for th	ne following amount:		, E	O1	-
325.00 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

Articles of Organization for this Limited Liability Company were filed on ida document number L240D0445884 amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: aew name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." er new principal offices address, if applicable: ncipal office address MUST BE A STREET ADDRESS) er new mailing address, if applicable: iling address MAY BE A POST OFFICE BOX) lf amending the registered agent and/or registered office address on our records, enter the name of 🛱 င်ညှဲလေ nt and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Registered Agent's Signature, if changing Registered Agent: reby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the

visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 1g filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

ipany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

mending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added emoved from our records:

R = Manager BR = Authorized Member

<u>Name</u>	Address	Type of Action
Asmanay Jean	5379 Lyons Rd 844	tt Add
· ·	5379 Lyons Rd 844 Coconut Creek FL 33	<u>07</u> 3_Remove
		□Change
		□Add
		□Remove
		□Change
		□Add
		SEGRETAGY OF STUTALLAHASSEL F
		FOAdd 2: U
		DChange
		□ Adđ
		□Remove
		□Change
		□Add
		□Remove
		□Change

f amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	-
	-
	_
	_
	-
	_
	_
	_
	_
	-
	-
SEC	2024 HOV 19
	- NOV
RETARY	• • •
————————————————————————————————————	- × -
三	္ငံ ယူ
Effective date, if other than the date of filing:(optional)	ח
t'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 60 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft d is filed.	er the
Dated 11/12/2024	
Signature of a member or authorized representative of a member	
LAVRENT JEAN	
Typed or printed name of signee	

Filing Fee: \$25.00