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FILED
2024 DEC 13 PM 3:16
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

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:

Holly Heinz

Name of Person

Captive Investigation Company LLC

Firm/Company

314 Barbara Circle Belleair, FL 33756

Address

Belleair, FL, 33756

City/State and Zip Code

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

at ()

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed) Certified Copy
(additional copy is enclosed)

Mailing Address: Street Address:

Registration Section
Division of Corporations
P.O. Box 6327 The Centre of Tallahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

2024 DEC 13 PM 3: 16

Captive Investigation Company, LLC

(Name of the Limited Liability Company as it now appears on our records.) STATE OF FLORIDA
(A Florida Limited Liability Company) TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on and assigned
Florida document number .

This amendment is submitted to amend the following:

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

Not amending - Captive Investigation Company, LLC

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)

Holly Heinz

314 Barbara Circle

Belleair FL, 33756

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 163

Clearwater, FL 33757

A. 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.

Holly Heinz

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

AMER = Authorized Member

Title Name Address Type of Action

CEO - Holly Heinz - MGR = Manager E\Add✓

314 Barbara Circle E\Remove

Belleair, FL 33756 E\Change

E\Add

E\Remove

E\Change

E\Add

E\Remove

E\Change

E\Add

E\Remove

E\Change

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E\Remove

E\Change

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

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2024 DEC 13 PM 3:16
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

A. Effective date, if other than the date of filing: (optional)

(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

12/11/24 . .

Signature of a member or authorized representative of a member

Holly Heinz

Typed or printed name of signee

Filing Fee: \$25.00