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2024 DEC 10 PM 4: 51

COVER LETTER

	LDINGS LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jaclyn R. Paige		
		Name of Person	
	PAIGE HOLDINGS LLC Name of Limited Liability Company		
		Firm/Company	
	728 Pine Shores Circle		
Division of Corporations SUBJECT: PAIGE HOLDINGS LLC			
	New Smyrna Beach, FL 32	2168	
		City/State and Zip Code	
	• • •		
For further information c		ŕ	ification)
Jaclyn R. Paige		·	
Name o	f Person		ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			antian.
-			
Tallahassee, 1	FL 32314	2415 N. Monro	pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PAIGE HOLDINGS LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lir	ompany as it now appears on our recor- nited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Com	pany were filed on 11/12/2024	and assigned
lorida document number 1.24000475331		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited	l liability company here:	
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		············
Principal office address MUST BE A STREET ADDRES	<u> </u>	
		7024 DEC
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		SSS T
		m's - U
3. If amending the registered agent and/or registered of	fice address on our records, <u>enter</u>	r the name of the new regist
gent and/or the new registered office address here:		
Name of New Registered Agent:		
	· <u> </u>	
New Registered Office Address:	Enter Florida street addre	40
	, FI	lorida
	City	rap conc

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.

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	Jeffrey K. Paige	728 Pine Shores Circle	
		New Smyrna Beach, FL 32168	□Remove
			■ Change
MGR	Jaclyn R. Paige	728 Pine Shores Circle	= Add
		New Smyrna Beach, FL 32168	□Remove
			□Change
			□Add
			Remove
		<u> </u>	□Add
			□Remove
			□Change
			□Add
			□Remove
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			□Remove

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Effective date, if other than the	date of filing:		(optional)	
(If an effective date is listed, the date must	t be specific and cannot be prior	r to date of filing or more that	n 90 days after filing.) Pursuant to 60	5.0207 (3)(
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applications applicate the properties applicated applications are conditionally applicated applications are consistent applications.	cable statutory filing requi	irements, this date will not be its	ted as the
the record specifies a delayed effective tord is filed.	e date, but not an effective t	ime, at 12:01 a.m. on the	earlier of: (b) The 90th day after	er the
Dated	2024			
	0			
1/2/				
	Signature of a member or auth	orized representative of a m	ember	
Jaclyn R. Paige				

Typed or printed name of signee