# 175000078518

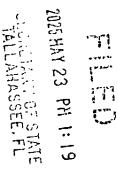
(Re	questor's Name)	
(Ad-	dress)	<u>.</u> .
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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# TALLAHASSEE COURTER SERVICES LLC

## **COVER LETTER**

TALLAHASSEECOURIER@GMAIL.COM Brandon Long, (850) 491-9625

**AMENDMENT FILING** 

\$25.00 (check attached)

**Business Name:** 

HIGH FIVE VENDING, LLC

**Document Number:** 

L25000078518

### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: HIGH FIVE	LENDING, LLC	
1	Same 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:	
JAS	ON POTTIER Name of Person	
	Name of Person	
HILA	+ FIVE VENDING, L	-L-C
	, ,	
_1000	HWY AIA STE	<u> </u>
	LITE BEACH, FL	32937
	City/State and Zip Code	:
HIGHEN	EVENDING @ GMAIL. ( all address: (to be used for future annua	l report notification)
For further information concerning this matter	rr, please call:	
	·	
JASON TROTTIER	at (603)	276-9421  Daytime Telephone Number
Name of Person	Area Code	Daytime Telephone Number
Enclosed is a check for the following amoun	ı:	
S25.00 Filing Fee S30.00 Filing Certificate of		Certificate of Status &
Mailing Address:	Street ?	Address:

Registration Section
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

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

HIGH FIVE VE	NONG LL	<u>C</u> FILED
(Name of the Limited Liability Compa (A Florida Limited)	iny ay It how appears on o Liability Company)	or 2023 PM 1: 20
The Articles of Organization for this Limited Liability Company  Florida document number <u>L2500078518</u> .	were filed on	14/200531 OF GENETATED ALLEANASSEE, FL
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designa	tion "LLC" or the abbreviation "L.L.C."
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)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	ls, enter the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	ect address
		Florida
	Ciţ	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent;	i	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	ree to act in this capace performance of my d	city. I further agree to comply with the lutics, 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 F LTVDe of Action Address Name <u>Title</u> 203 SAND PINE RD. 2025 HAY 23 PAJ 1: 40 BRIAN SAWYER SECRETARY OF STATE  $\square$  Add □Remove \_\_ Change  $\square$ Add \_ 🖵 Remove \_\_\_\_\_ Change ⊡∧dd \_\_ 🗆 Change \_\_\_\_ □Remove □ Change  $\square$ Add \_\_ 🗆 Remove \_\_\_\_\_ Change

	- FILED
	2025 MAY 23 PM 1: <b>2</b> 0
	SECRETARY OF STATE TALLAHASSEE, FL
<u> </u>	
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tive date, if other than the date of filing:	(optional)
If the date inserted in this block does not meet the	be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 c applicable statutory filing requirements, this date will not be lister
nent's effective date on the Department of State's r	records.
rd specifies a delayed effective date, but not an effe	ective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
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	Old )
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Significance of a mambar	or authorized representative of a member

Filing Fee: \$25.00