# L25000175450

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### **COVER LETTER**

TO:	Registration Se Division of Cor		3	
	The List Your B	ousiness Florida, LLC	7 5	
SUBJI			ted Liability Company	
			,	
The en	iclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please	return all correspo	ndence concerning this matter to	o the following:	
		Keith Booc		
			Name of Person	·
			Firm/Company	<del></del>
		875 W Bayshore Dr		
			Address	
		Tarpon Springs, FL 34689		
		kbooe@tworld.com	City/State and Zip Code	
		<del>-</del>	o be used for future annual report not	ification)
For fu	ther information c	oncerning this matter, please ca	·	
Keith	Booe		727 310-6228	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclos	ed is a check for th	ne following amount:		
<b>√</b> \$2	5.00 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

List Your Business Florida, LLC		<del></del>
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
(//) (0) (1)		, <del>-</del> `
The Articles of Organization for this Limited Liability Co	ompany were filed on 04-21-2025	and assigned
Florida document number 1.25000175450	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	٠. ,
Keith Allen Booe LLC		ර
he new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
<u>Principal office address MUST BE A STREET ADDR</u>	<u> </u>	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
maning unitess may be a rost of free boxy		
		<u> </u>
3. If amending the registered agent and/or registered igent and/or the new registered office address here:	l office address on our records, <u>enter the</u>	e name of the new regis
igent and/of the new registered office address nere.		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered virtue / Address.	Enter Florida street address	
	F1 .	
	, Florid	da 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.

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ffective date, if other than the	date of filing:		(option	al)
	be specific and cannot be pricely done not must the uppli	or to date of filing or mor	re than 90 days after fil	ing.) Pursuant to 605.0207
ffective date, if other than the of an effective date is listed, the date must cotac. If the date incorred in this bloom			requirements, this c	are will not be listed as
an effective date is listed, the date must iote: If the date inserted in this blo ocument's effective date on the De				
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iote: If the date inserted in this blo ocument's effective date on the De	date, but not an effective	time, at 12:01 a.m. or	the earlier of: (b)	The 90th day after the
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iote: If the date inserted in this blo ocument's effective date on the De record specifies a delayed effective I is filed.			the earlier of: (b)	The 90th day after the
iote: If the date inserted in this bloocument's effective date on the Decreeord specifies a delayed effective list filed.  August 28	2025	<u> </u>		
iote: If the date inserted in this bloocument's effective date on the Decreeord specifies a delayed effective list filed.  August 28	2025	<u> </u>		
iote: If the date inserted in this bloocument's effective date on the Decreeord specifies a delayed effective list filed.  August 28		<u> </u>		

# **Keith Allen Booe LLC**

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

August 29, 2025

#### To whom it may concern,

I am including my Amendment to my Articles of Organization to change to Keith Allen Booe LLC from List Your Business Florida, LLC

My return address is 875 W Bayshore Tarpon Springs, FL 34689. Daytime phone # 727-310-6228

Sincerely,

#### **Keith Booe**

CEO

875 W Bayshore Dr Tarpon Springs, FL 34689 727-310-6228 Daytime kbooe@tworld.com

