L250003637913

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
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Special Instructions to	Filing Officer:	

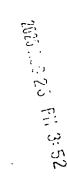
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COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor						
LA-METH						
SUBJECT:Name of Limited Liability Company						
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	LeAnne Ash					
		Name of Person				
	LA-METHOD					
Firm/Company						
	10223 Charleston Corner F	₹d				
		Address	 			
	Tampa, FL 33629					
	coachleanneash@gmail.con E-mail address: (City/State and Zip Code n to be used for future annual report notal	tication)			
For further information c	oncerning this matter, please c	ail:				
LeAnne Ash		239 634-0904 at ()				
Name o	f Person	Area Code Daytim	e Telephone Number			
Enclosed is a check for the	ne following amount:					
\$25,00 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 Addres		Street Address:				
Registration Section Division of Corporations			Registration Section Division of Corporations			
P.O. Box 6327			The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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

ARTICLES	r OKGANIZATI	ION
	OF	on our records.)
		1900 A
LA-METHOD, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears nited Liability Company)	on our records.)
e Articles of Organization for this Limited Liability Comp	pany were filed on Augu	aust 7, 2025 and assigned
rida document number L25000363793		
is amendment is submitted to amend the following:		
is allertation is stollitted to allerta the following.		
If amending name, enter the new name of the limited	liability company her	<u>'e</u> :
new name must be distinguishable and contain the words "Limited	Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."
ter new principal offices address, if applicable:		
<u>incipal office address MUST BE A STREET ADDRES</u>	<u>s</u>	
	 	
ter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registered of	fice address on our rec	cords, enter the name of the new res
ent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	D.a 171	da street address
	Emer Plona	a sirvei aaaress
		Florida
	Cin	Zip Code
w 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
	Michael Ash	10223 Charleston Corner Rd, Tampa, FL 33635	□ Add
			■Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			⊡ Кепюус
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			□Change
			□ Add
			□Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) please remove Michael (Mike) B. Ash from the AMBR E. Effective date, if other than the date of filing: ______ (optional)
(If 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 605,0207 (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 August 22 2025 Signature of a member or authorized representative of a member LeAnne Ash Typed or printed name of signee