

m23000007707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

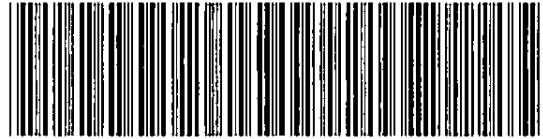
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

need proof of n/c

Office Use Only



900423409109

02/13/24--01020--012 **25.00

FILED

2024 APR -3 AM 11:15

SECRETARY OF STATE
TALLAHASSEE, FL

Name Change

APR 24 2024

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J. B. Clarke Limited Liability Company
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amy Highline
Name of Person

Corporate Direct, Inc.
Firm/Company

348 Mill St.
Address

Reno, NV 89501
City/State and Zip Code

ahighline@corporatedirect.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy Highline at (775) 284-7161
Name of Person Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)

FILED
2024 APR -3 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FL

Corporate Direct, Inc.

2248 Meridian Boulevard, Suite H
Minden, Nevada 89423

775-782-2201 - Main
775-782-2611 - FAX

February 5, 2024

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32399

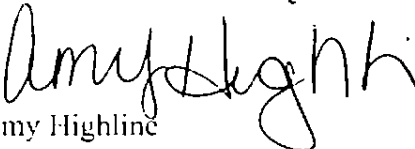
Re: J. B. Clarke Limited Liability Company

Dear Clerk:

Enclosed please find the original and one copy of the Application by Foreign Limited Liability Company to file Amendment to Certificate of Authority to Transact Business in Florida for the above-captioned entity. Also enclosed is a check for the filing fees. Once filed, please return the file-stamped copy to me at your earliest opportunity.

Thank you for your continued courtesy. Please do not hesitate to call me if you have any questions.

Best Regards,


Amy Highline
Incorporating Specialist

ah
Enclosures



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2024

AMY HIGHLINE
CORPORATE DIRECT, INC.
348 MILL ST
RENO, NV 89501

SUBJECT: J.B. CLARKE LIMITED LIABILITY COMPANY
Ref. Number: M23000007707

We have received your document for J.B. CLARKE LIMITED LIABILITY COMPANY and your check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following:

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Operations Manager A

Letter Number: 224A00005487

Rec 04/03/24

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: J. B. Clarke Limited Liability Company

Enter new principal office 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) _____

2. The Florida document number of this limited liability company is: M23000007707

3. Jurisdiction of its organization: Wyoming

4. Date authorized to do business in Florida: 06-06-2023

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Talamh Acquisitions, LLC
(must contain "Limited Liability Company," "L.L.C." or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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.

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<hr/>	<hr/>	<hr/>	<input type="checkbox"/> Add
		<hr/>	<input type="checkbox"/> Remove
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9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Jonathon Clarke

Signature of the authorized representative

Jonathon Clarke

Typed or printed name of signee

Filing Fee: \$25.00

STATE OF WYOMING
Office of the Secretary of State

I, CHUCK GRAY, Secretary of State of the State of Wyoming, do hereby certify that the filing requirements for the issuance of this certificate have been fulfilled.

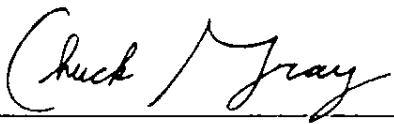
CERTIFICATE OF NAME CHANGE

Current Name: **Talamh Acquisitions, LLC**
Old Name: **J. B. Clarke Limited Company**

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official certificate at Cheyenne, Wyoming on this **3rd** day of **February, 2024**



Filed Date: 02/03/2024


Secretary of State

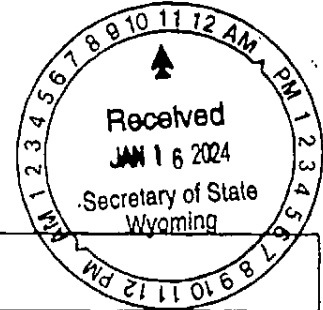
By: Jordyn Gray



Wyoming Secretary of State
Herschler Building East, Suite 101
122 W 25th Street
Cheyenne, WY 82002-0020
Ph. 307.777.7311
Email: Business@wyo.gov

WY Secretary of State
FILED: 02/03/2024 12:14 PM
Original ID: 2023-001274442
Amendment ID: 2024-004583278

Limited Liability Company Amendment to Articles of Organization



1. Name of the limited liability company:

(Name must match exactly to the Secretary of State's records.)

J. B. Clarke Limited Company

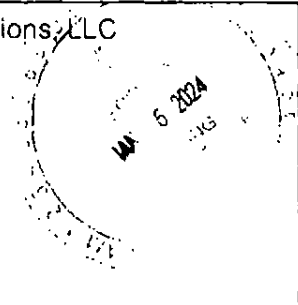
2. The date of filing its articles of organization: 05-24-2023

(Date must match exactly to the Secretary of State's records.)

3. Article number(s) 1 is amended as follows:

*See checklist below for article number information.

Article 1 is amended to show the name of the company shall be Talamh Acquisitions, LLC



Signature: Jonathon Clarke
(Shall be executed by a person authorized by the company.)

Date: 01-08-2024
(mm/dd/yyyy)

Print Name: Jonathon Clarke

Contact Person: Amy Highline

Title: Manager

Daytime Phone Number: 7752847161

Email: ahighline@corporatedirect.com

(An email address is required. Email(s) provided will receive important reminders, notices and filing evidence.)

Checklist

- ☐ Filing Fee: \$60.00 Make check or money order payable to Wyoming Secretary of State.
- ☐ Processing time is up to 15 business days following the date of receipt in our office.
- ☐ Please mail with payment to the address at the top of this form. This form cannot be accepted via email.
- ☐ Please review the form prior to submission. The Secretary of State's Office is unable to process incomplete forms.
- ☐ *Refer to original articles of organization to determine the specific article number being amended or use the next number in sequence if you are adding an article. Article number(s) is not the same as the filing ID number.

STATE OF WYOMING
Office of the Secretary of State

I, CHUCK GRAY, Secretary of State of the State of Wyoming, do hereby certify that according to the records of this office,

Talamh Acquisitions, LLC
is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **May 24, 2023**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2023-001274442**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 5th day of February, 2024 at 12:44 PM. This certificate is assigned ID Number 069293132.




Secretary of State