

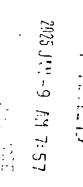
(Requestor's Name)
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(Address)
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PICK-UP WAIT MAIL
_
(Business Entity Name)
(Document Number)
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01/09/25--01010--001 **25.00



COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Proverbs 3:	5. LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	J Will Swaine		
		Name of Person	
	Proverbs 3:5, LLC		
		Firm/Company	
	145 West Center Avenue		
		Address	
	Sebring, FL 33870		
		City/State and Zip Code	
	will@swaineandleidel.com		· F
For further information c	oncerning this matter, please c	to be used for future annual report noti all:	meation)
J Will Swaine		at (863) 385-1101	
Name o	f Person		ne 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 Address		Street Address:	
Registration Section Division of Corporations		Registration Se Division of Cor	
P.O. Box 632	•	The Centre of T	
Tallahassee, l	FL 32314	2415 N. Monro	e Street Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Proverbs 3:5, LLC			
(<u>Name of the Limited Liabil</u> (A Florid:	ity Company as it now appears on our rec a Limited Liability Company)	cord <u>s.</u>)	
The Articles of Organization for this Limited Liability C	Company were filed on 12/27/2024	_	and assigned
lorida document number L25000000248			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "l	LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDI	RESS)		
			20
		- '+	<u> </u>
inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			9 :
same was a series of the serie			2 .11
			-:!
 If amending the registered agent and/or registere gent and/or the new registered office address here: 	d office address on our records, <u>en</u>	ter the name	ा of-the new regis
Name of New Registered Agent:			
New Registered Office Address:	•		
Silver Si	Enter Florida street ad	dress	
		. 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

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>	Name	Address	Type of Action
MGR	John 3:30, LLC	145 West Center Avenue, Sebring FL 33870	= Add
			□Remove
		 	Change
MGR Will Swaine	Will Swaine	145 West Center Avenue, Sebring FL 33870	□Add
			Remove
			Change
		<u> </u>	□ Add
			□Remove
			Change
			□ Add
			Remove
			Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□ Change

,	
	
(If an el Note:	ive date, if other than the date of filing:
f the reco ecord is f	d 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 led.
Dated	January 6
. > (4.00)	

Typed or printed name of signee