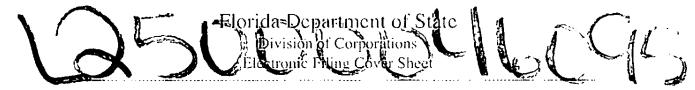
2/7/2025 09:35.54 CST Page: 1/5

2/6/25, 8:32 AM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H250000461063)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : I20220000070 Phone : (888)462-3453 Fax Number : (877)919-2613

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

EFILE1234@INCFILE.COM Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KAIZEN KOLLECTIVE LLC

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COVER LETTER

TO: Registration 8 Division of Co			
	KOLLECTIVE LLC		
SUBJECT:	Name of Lin	nted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
	LOVETTE DOBSON		
		Name of Person	
		Firm/Company	
	17350 STATE HWY 249	STE 220	
		Address	
	HOUSTON, TX 77064		
		City/State and Zip Code	,,, -
	F-mail address (to be used for future annual report not	dication)
For further information	concerning this matter, please c	all	
LOVETTE DOBSON		at () \$88-462-345 Area Code Daytin	53
Name	of Person	Area Code Daytin	æ Telephone Number
Enclosed is a check for	the 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 Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassec be Street, Suite 810

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KAIZEN KOLLECTIVE LLC	
(Name of the Limited Liability Company as it now appears on our records (A Fiorida Linuied Liability Company)	<u></u> 1
The Articles of Organization for this Limited Liability Company were filed on 01/27/2025 Florida document number 1.25000046095	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
THE THRIVE SOCIETY LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC"	on the abbreviation "LTC"
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 BON)	
B. If amending the registered agent and/or registered office address on our records, <u>enter t</u>	the name of the pew registered
agent and/or the new registered office address here:	25.
Name of New Registered Agent:	
Name Descriptions of COSS and Additional	₩ 1 F
New Registered Office Address: Enter Florida street address	7 0
•••	<u> </u>
Cin:	orida Zur Code
New Registered Agent's Signature, if changing Registered Agent:	The second secon
I hereby accept the appointment as registered agent and agree to act in this capacity. I fur-	
provisions of all statutes relative to the proper and complete performance of my duties, and accept the obligations of my position as registered agent as provided for in Chapter 605. F	
being filed to merely reflect a change in the registered office address. I hereby confirm tha	
company has been notified in writing of this change.	•

If Changing Registered Agent, Signature of New Registered Agent

2/7/2025 09.35:54 CST

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(((H25000046106 3))) 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
			□Add
			CiRemove
			🖸 Add
		Remove	
			□Remove
			□Change
			🗀 Add
		□Remove	
			□Change
			□Add
			⊟Remove
			[i](bange
.			□Add
			□Remove

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				<u></u>
ffective date, if other than the	date of filing:		(optio	nal)
an effective date is listed, the date must ote: If the date inserted in this blo ocument's effective date on the Do	ock does not meet the app	olicable statutory fi	r more than 90 days after ling requirements, this	date will not be listed as the
	·date, but not an effectiv	e time, at 12:01 a.i	n, on the earlier of: (b)	The 90th day after the
record specifies a delayed effective his filed.				
is filed.	2025			
FEBRUARY 6		 M	,	
FEBRUARY 6	202.5 Signature of a member of a	gydny Ry athorized enresental	i dot a member	