140 BELAIRE	DRIVE			
PANAMA CITY	ВЕАСҢ, FL 32413			
Current Mai	ling Address:			
140 BELAIR PANAMA CI	E DRIVE TY BEACH, FL 32413 US			
FEI Number: 88-1417596			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent	t:		
BURG LAW, P. 215 HARRISON				
BURG LAW, P. 215 HARRISOI PANAMA CITY	NAVE.	ging its registered office or regis	tered agent, or both, in the State of Flo	prida.
BURG LAW, P. 215 HARRISON PANAMA CITY The above name	NAVE. FL 32401 US	ging its registered office or regis	tered agent, or both, in the State of Flo	
BURG LAW, P. 215 HARRISON PANAMA CITY The above name	NAVE. FL 32401 US d entity submits this statement for the purpose of chang	ging its registered office or regis	tered agent, or both, in the State of Flo	
BURG LAW, P. 215 HARRISOI PANAMA CITY The above name SIGNATURI	NAVE. FL 32401 US d entity submits this statement for the purpose of chang E: LISA SAMPLE	ging its registered office or regis	tered agent, or both, in the State of Flo	09/30/2022
BURG LAW, P. 215 HARRISOI PANAMA CITY The above name SIGNATURI	NAVE. FL 32401 US d entity submits this statement for the purpose of changes E: LISA SAMPLE Electronic Signature of Registered Agent	ging its registered office or regis	tered agent, or both, in the State of Flo	09/30/2022
BURG LAW, P. 215 HARRISON PANAMA CITY The above name SIGNATURE Authorized	NAVE. FL 32401 US d entity submits this statement for the purpose of changes E: LISA SAMPLE Electronic Signature of Registered Agent Person(s) Detail :			09/30/2022
BURG LAW, P. 215 HARRISON PANAMA CITY The above name SIGNATURE Authorized Title	NAVE. FL 32401 US d entity submits this statement for the purpose of change E: LISA SAMPLE Electronic Signature of Registered Agent Person(s) Detail : AMBR	Title	AMBR	09/30/2022

DOCUMENT# L21000500976

Entity Name: SAMPLE FAMILY HOLDINGS, LLC

Current Principal Place of Business:

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LISA SAMPLE MEMBER

Electronic Signature of Signing Authorized Person(s) Detail

09/30/2022

Date

FILED Sep 30, 2022 Secretary of State 0340403930CR