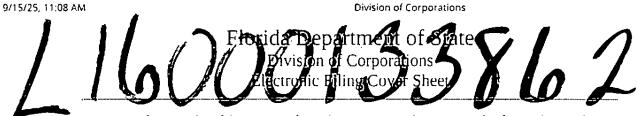
**Division of Corporations** 



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(((H25000330230 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name :

Account Number : 120090000081

Phone

Fax Number : (813)436-5206

Email Address:

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## HOUSE OF ALCHEMY L.L.C.

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SEP 16 2025

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Fax: 18134365206

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2025 SEP 15 PM 2: 14
TALLAHASSEF, FLORID,

House of Alchemy L.L.C. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on and assigned L16000133862 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 BOX) B. If amending the registered agent and/or registered office 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

## 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.

Sep 15, 2026 08:16 To: ~18506176383 Page: 3/4 Fax: 18134365206

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Straughan, Joseph	23110 SR 54 No 361	🗀 Add
		Lutz, FL 33549	(XRemove
			□Change
AMBR	Straughan, Joseph	23110 SR 54 #448	⊠Add
		LUTZ FL 33549	□Remove
			Change
MGR	ARDOLINO, ANGELA	23110 SR 54 #448	<b>X</b> IAdd
		LUTZ FL 33549	□Remove
			□Change
AMBR	UMANA, HERNANDO	4244 Gateway Ave.	X\Add
		Los Angeles, CA 90029	□Remove
			SEP Arts
			PREMIOVE CHange
			□Add
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
SEP 15 P
SSE T
<del> </del>
E. Effective date, if other than the date of filing:  (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 SEPTEMBER 15TH 2025
Signature of a member or authorized representative of a member
NAT SMITH

Typed or printed name of signee