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COVER LETTER

	Registration S Division of Co			
SUBJEC	2782	'NN DOUGHERTY, LLC		
SUBJEC	-1: <u></u>	Name of Lim	ited Liability Company	
The encl	osed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all corresp	ondence concerning this matter	to the following:	
		KELLI DOUGHERTY		
			Name of Person	
			Firm/Company	
		2575 CR 422		
			Address	<u> </u>
		LAKE PANASOFFKEE.	FL 33538	
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notification)	
For furth	er information	concerning this matter, please c	all:	
KELLIT	OOUGHERTY		727 601-2664 at ()	
	Name	of Person	Area Code Daytime Telephone S	Number
Enclosed	is a check for	the following amount:		
■ \$25.8	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Co (additional copy is enclosed) Co	0.00 Filing Fee, ertificate of Status & ertified Copy klitional copy is enclosed)
	Mailing Addre		Street Address: Registration Section	
	Division of (Corporations	Division of Corporations	
	P.O. Box 63 Tallahassee,		The Centre of Tallahassee 2415 N. Monroe Street, S	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

KELLI LYNN DOUGHERTY, LLC

2022 MAY 20 PM 1:27

(Name of the Limited Liability Company as it now appears on our records RETARY UP STOLE (A Florida Limited Liability Company)

FATTAHASSEE, FLUE TALLAHASSEE, FLORE The Articles of Organization for this Limited Liability Company were filed on 02/04/2022 and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Serenity & Co LLC 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

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 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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Add
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