## L21000100372

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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03/28/21--01018--014 \*\*25.00

Office Use Only

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## COVER LETTER

TO:

Registration Section

Division of Cor	porations					
	TINCS LLC					
SUBJECT:	VBJECT: Name of Limited 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:				
	XILONEM PIPER					
		Name of Person	<del></del>			
		Firm/Company				
31 SE 5TH ST APT 503						
		Address				
	Miami, FL 33131					
	info@rawinstinctsmia.com	City/State and Zip Code				
		to be used for future annual report n	otification)			
For further information c	concerning this matter, please c	all:				
Xilonem Piper		305 900-3887				
Name c	of Person	at () Area Code Dayt	ime Telephone Number			
Enclosed is a check for t	he 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 Section Division of Corporations			
P.O. Box 6327		The Centre of	The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Moni	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RAW INSTINCS LLC (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 March 2, 2021 and assigned Florida document number L21000100272 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RAW INSTINCTS LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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:

## 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.

City

Enter Florida street address

\_. Florida \_\_\_

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
		<del></del>	□Remove
	<del></del>		□Add
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<u>Note:</u> 11	e date, if other than the ive date is listed, the date must the date inserted in this blacks effective date on the D	ock does not m	eet the applicable s	of filing or more than 90 d atutory filing requireme	_ <b>(optional)</b> ays after filing.) Pursuant ents, this date will not b	to 605.0207 (3)(b) be listed as the
If the record s record is filed	specifies a delayed effectiv l.	e date, but not a	an effective time, at	12:01 a.m. on the earlie	er of: (b) The 90th da	y after the
Dated M	ARCH 10		2021			
13,tiett		Like !	·			
		Signature of a n	icmber or authorized:	representative of a member		
	XILONEM PIPER					
			Typed or printed nam	e of signee	· · ·	