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Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sirls Love PearLs LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Maria F Diaz Name of Person Maria F Diaz CPA Firm/Company 2250 NW 13C ADD Address Pendroke Product F1, 33336 City/State and Zip Code Mo Cpa a be 1500 Hand E-mail address: No be used for future annual report notification)
For further information concerning this matter, please call:
Maria & Dias Name of Person at (979 499-7879) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:

□\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□\$30.00 Filing Fee &

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

. Girls	Love Pearls	LLC	
(<u>Name of the Limited</u> (A	Liability Company as it now appea Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Li Florida document number	ability Company were filed on	17/11/2017	nd assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liability company her	<u>re</u> :	
Love	Always Jan	00 Lavy 44C	
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Compa	iny," the designation "LLC" o	or the abbreviation
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		
			2019
Enter new mailing address, if applicable:		84.55 85.55 85.55	THE T
(Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>		10
		50	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered of	or registered office address on e fice address here:	our records, enter the na	of the new
Name of New Registered Agent:	Stephani	e Diaz	
New Registered Office Address:	<u>2920 NM</u>	136 AUC	
	Pembroke Ding	Florida 333	OE.
	City	Zip	Code

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 608, 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>M6R</u>	Maria Diaz	Rembrola Para Fl 330	Add Remove
		•	Add
		True State Control of the Control of	Add Remove
			Add Remove
			Add
			Add Remove

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ited	<u>//15 , 20/3 .</u>
	\sim 1 1 0 \sim
	Signature of a member or authorized representative of a member
	Stephonie Diaz Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00