# 614000057436

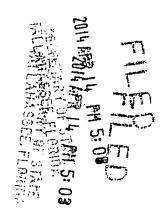
(Re	questor's Name)	•
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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# **COVER LETTER**

TO: Registration S Division of Co.			
LIFE	IS GORGEO	US. LLC.	
SUBJECT:		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Guy Spiege	lman, Esquire	
		Name of Person	
	Guy Spiege	lman Attorney at	Law
	·	Firm/Company	
	19 West Fla	gler Street, Suite	e 912 🏻 🚆 🚆
		Address	
	Miami, Flori	da 33130	e 912
		City/State and Zip Code	T (
	ggs@spiegelman	aw.com to be used for future annual report notif	の ication) の ication の
For further information of	concerning this matter, please c	·	ज़िला 🐱
Guy Spiege		305 373-6	634
Name o	of Person		: 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:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LIFE IS GORGEOUS, LLC.		
( <u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability C Florida document number L14000057436		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the words "Li	mited 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 ADDI	RESS)	\(\frac{1}{2}\)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		ZOIL AFR ILL PH I
B. If amending the registered agent and/or registered agent and/or the new registered office add		ter the name of the new
Name of New Registered Agent:		·····
New Registered Office Address:	Enter Florida street address	
	. Florida	
	, FIUTICIA	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 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 Changing Registered Agent, Signature of New Registered Agent

If a'mending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = 'Manager AMBR = Authorized Member **Type of Action** <u>Address</u> Title Name HART OM, L.L.C. 1508 Bay Road, Suite 1021 MGR \_□ Add Miami Beach, Florida 33139 **■** Remove 1508 Bay Road, Suite 1021 Hari OM Namoh, L.L.C. MGR ■ Add Miami Beach, Florida 33139 ☐ Remove □ Add □ Remove □ Add ☐ Remove □ Add ☐ Remove

f amending any other inf	ormation, enter change(s) here: (Attach additional	sheets, if necessary.)
Effective date, if other that The effective date must be specified by	n the date of filing:  c, cannot be prior to date of receipt or filed date and cannot be me the Florida Department of State)	(optional) ore than 90 days after
Dated April 10	2014 MA Alfrey	
	Signature of a member or authorized representative of a	Arrowiby 2014 MPR
		THE PHANT OF ARTHUR SEEL F
		FLawor

Page 3 of 3

Filing Fee: \$25.00