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COVER LETTER

	ation Section 1 of Corporations
The SUBJECT:	e Harmonius Heart LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Art	icles of Amendment and fee(s) are submitted for filing.
Please return all o	correspondence concerning this matter to the following:
	Roxanne Smith
	Name of Person
	The Harmonious Heart LLC
	Firm/Company
	11345 NW 3rd Place
	Address
	Coral Springs, FL 33071
	City/State and Zip Code
	live4peace@att.net
	E-mail address: (to be used for future annual report notification)
For further inforn	nation concerning this matter, please call:
Iveta Rietschel	305 775-5294 at ()
	Name of Person Area Code Daytime Telephone Number
Enclosed is a chec	ck for the following amount:
■ \$25.00 Filing	Fee \$\Bigcup \\$30.00 \text{ Filing Fee & Certificate of Status}\$ \Bigcup \\$55.00 \text{ Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \Bigcup \\$60.00 \text{ Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \Bigcup \\$60.00 \text{ Filing Fee, 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

FILED 2015 SEP 28 AM 9:59 Chicketaky of State EALLAMASHEF, FLORIDA

The Harmonius Heart LLC		
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our reco da Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability	Company were filed on 02/18/2015	and assigned
lorida document number L15000037532	·	
This amendment is submitted to amend the following:		
. If amending name, enter the new name of the lin	nited liability company here:	
The Harmonious Heart LLC		
he new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LI	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX		
3. If amending the registered agent and/or regi		ds, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ress
<u> </u>	, I	Florida
	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 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 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 **Address Type of Action Title** Name _ Add _□ Remove _□ Change _□ Add ☐ Remove _□ Change □ Add ☐ Remove _□ Change _□ Add _□ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add _□ Remove _□ Change

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f an effective date is listed, the date mu	e date of filing: Inst be specific and cannot be prior to date of filing or more than block does not meet the applicable statutory filing requipepartment of State's records.	(optional) 190 days after filing.) Pursuant to 605.0207 (3)(b) 1 rements, this date will not be listed as the
document's effective date on the I		
document's effective date on the I	d effective date, but not an effective time, cord is filed.	at 12:01 a.m. on the earlier of:
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document's effective date on the I	ecord is filed. 2015 Me Smith	
document's effective date on the I ne record specifies a delaye The 90th day after the rec	cord is filed.	

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Filing Fee: \$25.00