## L150000087336

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12/23/20

## **COVER LETTER**

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TO:

SUDJECT.	-			
SUBJECT	-	Name of Limi	ited Liability Company	· ·
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.	
		• •	_	
	Division of Corporations  Tulsi Enlightens Enterprises, LLC  Name of Limited Liability Company  enclosed Articles of Amendment and fee(s) are submitted for filing.  see return all correspondence concerning this matter to the following:  Rachelle Simon  Name of Person  Firm/Company  2358 Silver Palm Drive  Address  Kissimmee, FL 34747  City/State and Zip Code  tqg.enterprises@gmail.com  E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:			
			Name of Person	
			Firm/Company	
		2358 Silver Palm Drive		
			Address	<del></del>
		Kissimmee, FL 34747		
		tag.enterprises@gmail.com	City/State and Zip Code	
		·- · · · · · · · · · · · · · · · · · ·	to be used for future annual report no	otification)
For further in	formation con	cerning this matter, please ca	ıll:	
Rachelle Simon		at ()		
	Name of P	erson	Area Code Dayti	me Telephone Number
Enclosed is a	check for the	following amount:		
□ \$25.00 Fi	ling Fee		Certified Copy	Certificate of Status & Certified Copy
		ction		ection
Division of Corporations		Division of Co The Centre of	•	
P.O. Box 6327 Tallahassee, FL 32314				oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tulsi Enlightens Enterprises, LEC		
(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our recorded Liability Company)	rds.)
The Articles of Organization for this Limited Liability Compa Florida document number L15000087336	any were filed on May 18.2015	and assigned
This amendment is submitted to amend the following:	number L15000087336  Is submitted to amend the following:  name, enter the new name of the limited liability company here:  be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  ipal offices address, if applicable:  address MUST BE A STREET ADDRESS)  ag address, if applicable:  MAY BE A POST OFFICE BOX)  the registered agent and/or registered office address on our records, enter the name of the new registered new registered office address here:  New Registered Agent:	
A. If amending name, enter the new name of the limited li	eles of Organization for this Limited Liability Company were filed on May 18,2015 and assigned occument number L15000087336 and assigned occument number L15000087336 and assigned occument is submitted to amend the following:  ending name, enter the new name of the limited liability company here:  Intermediate distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." we principal offices address, if applicable:  Intermediate distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." we principal offices address, if applicable:  Intermediate distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." we principal office address MUST BE A STREET ADDRESS)  We mailing address, if applicable:  2358 Silver Palm Dr. Kissimmee, FL 347422	
The new name must be distinguishable and contain the words "Limited Li	lability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2358 Silver Palm Dr. Kissimi	<del></del>
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our records, <u>ente</u>	\ <u>\</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	ess
	, F	`lorida
	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 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
MGR	Jean Robert Achille	3071 Bollard Road West Palm Bch, FL 33411	🗆 Add
			Remove
			□Change
MGR	Jean Gary Joseph	10505 Marsh Street Wellington, FL 33414	□ Add
			Remove
		<del></del>	□Change
		<u></u>	200 Add FEBRUSE 200 NOV 20 F
			T☐CHange  GAdd
		<del></del>	□Remove
			□Change
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I Rachelle Simon is the SOLE MBR for TULSI ENLIGHTENS ENTERPRISES, LL	C.	
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ective date, if other than the date of filing:  In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 900 te: If the date inserted in this block does not meet the applicable statutory filing requires turnent's effective date on the Department of State's records.		
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear s filed.	rlier of: (b) The 90th da	y after ti
ed November 17th  2020  Signature of a member or authorized representative of a mem	ber	
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γ · · · · · · · · · · · · Signature oya member or authorized representative of a mem		