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Office Use Only

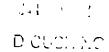


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COVER LETTER

Tallahassee, FL 32314

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cup in on	Lifeline M3	3dia Group						
SUBJECT	:	Name of Lim	ited Liability Company					
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please retu	rn all correspo	ondence concerning this matter	to the following:					
		Daniel Jones						
			Name of Person			_		
		God's Love Apparel						
			Firm/Company					
		501 Carley Lane						
	Address					_		
		Cocoa, FL 32926				4.5	2	
		P1	City/State and Zip C	ode	· · · · · · · · · · · · · · · · · · ·		2022 JAN -3	
		Godsloveapparel@gmail.co				1, 1	\hat{\frac{1}{2}}	,
		E-mail address: (to be used for future an	nual report notifica	tion)	-	ည် ို	•
For further	information c	oncerning this matter, please of	all:				p i	
Daniel Jon	ies		321	986-7150			PH 2:	-
	Name o	f Person	at (Area Code	Daytime Ti	elephone Numbe	er , ; ;	<u>1,7</u>	
Enclosed is	s a check for t	he following amount:						
■ \$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing 1 Certified Cop (additional copy)	у	Certifie	ate of Si	tatus &	
	lailing Addres			et Address: distration Section	Oti.			
Registration Section Division of Corporations P.O. Box 6327			_	ision of Corpo				
			The	Centre of Tall	lahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lifeline M3dia Group (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 $\frac{7/8/2015}{2}$ Florida document number L15000117740 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: God's Love Apparel, LLC The new name must be distinguishable and contain the words "Limited 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 ADDRESS) God's Love Apparel Enter new mailing address, if applicable: PO Box 8162 (Mailing address MAY BE A POST OFFICE BOX) Cocoa, FL 32924 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: Latoya Y. Bognear Jones Name of New Registered Agent: 501 Carley Lane New Registered Office Address: Enter Florida street address , Florida 32926 Zip Code Cocoa City

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
CFO	Daniel Jones	501 Carley Lane	□ Adđ
		Cocoa, FL 32926	□Remove
			≝Change
CEO	Latoya Y. Bognear Jones	501 Carley Lane	□Add
		Cocoa, FL 32926	□Remove
			(Change
			□Add
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	01/03/2022			
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an effective date is listed, the date must bloce. If the date inserted in this bloc	e specific and cannot be prior to a k does not meet the applicable	e statutory filing require	ements, this date will not be	605,0207
ocument's effective date on the Dep	artment of State's records.			
record specifies a delayed effective of d is filed.	late, but not an effective time	, at 12:01 a.m. on the ea	irlier of: (b) The 90th day	after the
a ni crean				
December 29 Dated	2021			
	7	•		
1)-40	gnature of a member or authoriz			_
3	gnature of a member or authoriz	ed representative of a men	nber	
Daniel Jones				
	Typed or printed r	name of signee	·	_

Filing Fee: \$25.00