## 115000204903

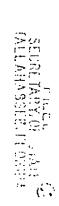
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: M/Y Unfolding Life Consumer of Emitted Liability Company	packing LLC
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Brenda Lee	Rockward
M/Y Unfolding L	ife Coaching LLC
3119 Spring Glen	Road, Ste 114
Jacksonville, F City/State and Zip C Coach brenda on life E-mail address: (to be used for future ar	
For further information concerning this matter, please call:	, , , , , , , , , , , , , , , , , , ,
Brenda Lee Rockward at (904 Name of Person Area Code	) 735-1287 Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing	Fee & <b>⊠</b> \$60.00 Filing Fee,

MAILING ADDRESS:

Certificate of Status

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

Certificate of Status &

(additional copy is enclosed)

Certified Copy

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

Certified Copy

(additional copy is enclosed)

## ARTICLES OF AMENDMENT

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ARTICLES OF O	RGANIZATION	AE AE
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	- -	명 폭달.
	iching LLC	DEC - 4- AH
' ( <u>Name of the I Jmited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
	• •	<b>10</b>
The Articles of Organization for this Limited Liability Company	were filed on 11-30-301	7 and assigned
Florida document number <u>L 15000204903</u> .		
riorida document flumber <u>L 2000000 / 103</u> .		
This amendment is submitted to amend the following:		
_		
A. If amending name, enter the new name of the limited liab	ility company here:	
N// A		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	3119 Spring Glen Ste 114	Koaci
(Principal office address MUST BE A STREET ADDRESS)	5+e114 V	
	Jacksonville, FL	32207
	2110 Carrie Cla	0 1
Enter new mailing address, if applicable:	3119 Spring Gler Stell4	1 Koaa
(Mailing address MAY BE A POST OFFICE BOX)		
	Jacksonville, F	こ 32207
B. If amending the registered agent and/or registered of	Tice address on our records, enter	the name of the new
registered agent and/or the new registered office address here	· · · · · · · · · · · · · · · · · · ·	the Marke of the Men
N CN D C C	$\Lambda / / \Lambda$	
Name of New Registered Agent:	$-\mathcal{N}/\mathcal{T}$	<del> </del>
New Registered Office Address:	,	
	Enter Florida street address	· · · · · · · · · · · · · · · · · · ·
	- الاستاناء	
	, 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 <u>Title</u> Name | **Address Type of Action** \_D Add ☐ Remove ☐ Change \_□ Add □ Remove \_ Change \_□ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove \_□ Change

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(If an eff	ve date, if other than the date of filing:	to 605.0207 (3
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not been 's effective date on the Department of State's records.	e listed as th
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 990th day after the record is filed.	earlier of:
,		
Dated	11-30 $2017$	
	Brenda Lee Lockward	
	Signature of a member of authorized representative of a member	
	Brenda Lee Rockward	

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Filing Fee: \$25.00