L16000168470

(Re	questor's Name)	
(Ad	ldress)	
,	,	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
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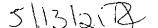
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COVER LETTER

TO: Registration Section

Tallahassee, FL 32314

Division of Cor	•		
GETBODII SUBJECT:	EDBYSANDY LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. asse return all correspondence concerning this matter to the following: Sandy Jean Pierre		
		-	
		ing.	
	Sandy Jean Pierre		
		Name of Person	
		Firm/Company	
	260 NE 30TH COURT		
		Address	
	POMPANO BEACH, FL	33064	
		City/State and Zip Code	
For further information c			icanon)
Sandy Jean Pierre			
Name o	f Person		e Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Addres		Street Address:	
Registration S Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now ap. (A Florida Limited Liability Company)	pears on our records.)
(A Florida Limited Liability Compai	y)
The Articles of Organization for this Limited Liability Company were filed on	09/09/2016 and assigned
lorida document number L16000168470	
ionda decument number	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>/ here</u> :
Her Kollections LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," t	he designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	···
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
Mulling dudress MAT BE A FOST OFFICE BOAT	
3. If amending the registered agent and/or registered office address on or	ir records, enter the name of the new regis
gent and/or the new registered office address here:	1:3
Name of New Registered Agent:	<u> </u>
NI D 1 LOW A LL	.
New Registered Office Address: Enter	Florida street address
	. Florida
	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
			□Add
			□Remove
			□Change
			□ A dd
			□Remove
			□Change
			□Add
			□Remove
		 	□Change
			□Add
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Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this blocument's effective date on the Defective date on the Defective date.	the specific and cannot be pri ock does not meet the appl	icable statutory filing requi	(optional) 90 days after filing.) Pursuant rements, this date will not	t to 605.0207 be listed as
record specifies a delayed effective d is filed.	date, but not an effective	time, at 12:01 a.m. on the	earlier of: (b) The 90th da	y after the
Dated March 16	2021	·		
z FRF				
	Signature of a member or aut	horized representative of a me	mber	_