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COVER LETTER

Division of Corporations
SUBJECT: Lanlaura, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rondy North Name of Person Lanlaura, LL Finn/Company
4611 S. University Drive, Ste. 313
City/State and Zip Code rand y nor the real to Rogman - com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (954) 483-0907 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Status Solution Status Solution Status Status Solution Status Status Status Solution Status Status Solution Status Status Status Status Status Status Solution Status Sta
Mailing Address: Registration Section Street Address: Registration Section

Registration Section
Division of Corporations
P.O. Box 6327

Registration Section

TO:

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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 9/27/20/6 and assigned Florida document number 1/400179750 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 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) 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 Agent: New Registered Office Address: **WILS Harry Stry Live Ste 3/3** Enter Florida 3338 **Enter	Lanlaura LLC
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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: Name of New Registered Agent: New Registered Office Address: New Registered	(Mailing address MAY BE A POST OFFICE BOX) [Mailing address MAY BE A POST OFFICE BOX]
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Name of New Registered Agent: New Registered Office Address:	B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered
New Registered Office Address: 46/1 S. University Dive Ste. 3/3 Enter Florida street address Florida 33328	agent and/or the new registered office address here:
New Registered Office Address: 46/1 S. University Dive Ste. 3/3 Enter Florida street address Florida 33328	Name of New Registered Agent
	New Registered Office Address: 4/1/ S. University Dive Ste. 3/3
	Davie Florida 3338 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
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