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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: <u>Lula Roe</u> by Haley and Carmen  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:
Hatey Gromez or Carmen Moler Name of Person  Fun Meets Comfort by Hutey and Carmen  Fim/Company
Fun Meets Comfort by Hutey and Carmen
3322 Young St Address
Winter Park FL 32792  City/State and Zip Code  Lularoe by haley and Camena gmail. Com  E-mail address: (10 be used for future annual report notification)
For further information concerning this matter, please call:
Hatey Gromez at (321) 948-7488  Name of Person  Carmen Moler 407 780 - 7039
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Solutional Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\times \text{Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed)

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LULAROE BY HALEY AND CARMEN L.C.

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

11/28/2016 . . .

Florida document number <u>L1600216129</u>	ere filed on		and ass	agnea	
Florida document number					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabili	ty company here:				
FUN MEETS COMFORT B'	Y HALEY AND	) C	AR	MET	$\sim$
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	e abbrevia	ation "L.	L.C."	CC
Enter new principal offices address, if applicable:					-
(Principal office address MUST BE A STREET ADDRESS)					_
					_
Enter new mailing address, if applicable:			6) (1)		
(Mailing address MAY BE A POST OFFICE BOX)		i j	C	;÷.	-
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		THE STATE OF	70		-
B. If amending the registered agent and/or registered offi	ce address on our records, ent	- er⊏the		of the r	new
registered agent and/or the new registered office address here:	-	- 32.	(°)		
		7>.	,		
Name of New Registered Agent:					-
New Registered Office Address:					
11011 110511111111111111111111111111111	Enter Florida street address				-
	, Florida				
	City	Zi	p 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 = Ma $AMBR = Au$	anager athorized Member		
<u>Title</u>	Name	Address	Type of Action
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			☐ Remove
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	FLORIDA
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Effective date, if other than the date of filing:	(ontional)
If an effective date is listed, the date must be specific and cannot be prior to date of filing or monomore. If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	re than 90 days after filing.) Pursuant to 605.02 requirements, this date will not be listed
ne record specifies a delayed effective date, but not an effective tine.  The 90th day after the record is filed.	me, at 12:01 a.m. on the earlier
Dated	
Carmen Moler  Carmen Moler  Typed or printed name of signee	of a member

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Filing Fee: \$25.00