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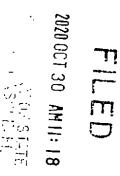
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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Will on 2023

COVER LETTER

Division of Corporations
SUBJECT: Love's Parden Yoga & Boutique, 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:
Adrienne Lerfald Name of Person Love's Parden Yoga & Boutique, LLC Firm/Company
7820 17th Ave. West
Bradenton, FL 34209 City/State and Zip Code O Vesparden Camail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Adrienne Lerfald at 941, 565-1401 Name of Person at 941, Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:

TO: Registration Section

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

Street Address:

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 OF

(Name of the Limited Limited Limited Limited L	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on $10/07/19$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil Love's Parden Yoga & B. The new name must be distinguishable and contain the words "Limited Liability L	outique, LLC
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	Some
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SONO TI
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address , Florida City Zin Code
	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>	<u>Name</u>	Address	Type of Action
			🗆 Add
			□Remove
			□Change
			🗆 Add
		□Remove	
			□Change
			30 Remove
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			□Change
			□Add
			□Remove
			□C'hange

* Only changing the name from:		
Love's Parden Yoga, LC to		
Love's Parden Yoga & Boutique, LIC		_
	2020 OCT	
	30	
	AH	
		
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after form to date inserted in this block does not meet the applicable statutory filing requirements, this	iling.) Pursuant i	
document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)		
Dated September 2020.	·	
Signature of a member or authorized representative of a member		_
Adrienne Lerfald Typed or printed name of signee		