K17000121747

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05/24/2022

To whom it may concern:

This Article of Organization form is to change the addresses on my LLC.

Principal, Mailing, Registered Address, & Authorized Person Address.

My return address is 9517 Fox Trot Lane Boca Raton, FL 33496 My phone number is 561-886-7556

Thank you,

Yoram Rozenberg

ROZE LABORATORIES, LLC

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co			
SHRIECT: Q	.02e Labora+	tories LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Yoram	Rozenberg Name of Person	
	lore L	aboratories, LL Firm/Company	<u> </u>
	9517 FOX	Trot Lane	
	Boca Rata	City/State and Zip Code	
	Yrozenbergz E-mail address: (to be used for future annual report notifi	ication)
For further information of	concerning this matter, please ca	all:	
Yoram Ro	zenberg	at (501) 880 Area Code Daytime	7556
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration		Street Address: Registration Sec	tion
Division of C P.O. Box 632	Corporations	Division of Corp The Centre of Ta	
r.Q. dox qo.	41	THE CERTE OF TA	ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

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FILED

2022 HAY 3! AM II: 18

Loze Laboratories,	
(Name of the Limited Liability Comp. (A Florida Limited	Liability Company) TALLAHASSEE, FL
The Articles of Organization for this Limited Liability Company	were filed on $\frac{OC/OS/2017}{}$ and assigned
Florida document number <u>L17000121747</u> .	,
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9517 FOX Trot Lane
(Principal office address MUST BE A STREET ADDRESS)	Boca Raton, FL 33496
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9517 FOX Trot Lane Bora Raton, FL 33496
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	
Name of New Registered Agent: LOZer	FOR TOOL Lane
New Registered Office Address: 9517	FOL TO+ Lana Enter Florida street address
Bora	Latin , Florida 33496 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
MGR	Rozenberg, Yaram	9517 Fox Trot Lane	□Add
		Boca Rotton, FL 33494	□Remove
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			🗆 Add
			□Remove
			Change
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