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(R	equestor's Name)	
(A	ddress)	
(A	ddress)	 .
(C	ity/State/Zip/Phone #	/ /)
PICK-UP	WAIT	MAIL
(B	usiness Entity Name)
(D	ocument Number)	
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K. SALY JUN 28 2017

COVER LETTER

Division of Co.	rporations		
	NCE CONCEPTS LLC		
SUBJECT:	NAME OF Limited Liability Company FAmendment and fee(s) are submitted for filing. Condence concerning this matter to the following: ELIZABETH SOUTHERS Name of Person CONSCIENCE CONCEPTS LLC Firm/Company 6221 SW 33RD STREET Address MIRAMAR, FL 33023 City/State and Zip Code e.southers@outlook.com E-mail address: (to be used for future annual report notification) concerning this matter, please call: RS 31 (Area Code Daytime Telephone Number		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	ELIZABETH SOUTHERS	5	
		Name of Person	
	CONSCIENCE CONCEP	TS LLC	
		Firm/Company	
	6221 SW 33RD STREET		
		Address	
	MIRAMAR, FL 33023		
		City/State and Zip Code	
	-	16.6	7716
For further information of			meanon)
ELIZABETH SOUTHE			
Name o	of Person	at () Area Code Dayti	me 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 ADDRESS:

TO:

Registration Section

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

2017 JUN 23 PM 2:59

ALLAMASSEE, FISIAM
ORIGINA

CONSCIENCE CONCEPTS LLC

(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 Co.	mpany were filed on $\frac{06/08}{}$	2017	and assigned
Florida document number L17000125429			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:	:	
CONSCIOUS CONCEPTS LLC			
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the desig	gnation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>		
(Principal office address MUST BE A STREET ADDRE	<u> </u>		
			<u></u>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office address Name of New Registered Agent:	ess here:	ur records, enter	the name of the new
New Registered Office Address:		street address	
	City	, Florida	Zin Codo
	•		z.p Соае
New Registered Agent's Signature, if changing Registered			
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and con accept the obligations of my position as registered ago being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my ent as provided for in Chi	v duties, and Lam fo upter 605, F.S. Or,	amiliar with and if this document is
	If Changing Registered Agen	t, Signature of New Re	gistered Agent

or removed from our records: MGR = Manager AMBR = Authorized Member		Address Add	
<u> Fitle</u>	<u>Name</u>	Address PM 2: 59	Type of Action
		- AMASSEE, FLORING	
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ective date, if other than th	re date of filing:			(opti	onal)	
ective date, if other than the effective date is listed, the date in this. If the date inserted in this.	ust be specific and cannot	be prior to dat	e of filing or more	than 90 days after	r filing.) Pursuant to e date will not be	5 605.020 Clietod a
rument's effective date on the	Department of State's r	records.	statutory ming re	quirements, un	s date will not be	. Hateu e
record specifies a delaye	ed effective date it	out not an	effective tim	e. at 12:01 a	a.m. on the e	arlier (
he 90th day after the re		, , , , , , , , , , , , , , , , , , , ,		,		
ed	2017	7				
CO	,,	·				
	W Sallan					
- Eduplio	Signature of a member	or authorized	representative of a	ı niember		_

Page 3 of 3

Filing Fee: \$25.00