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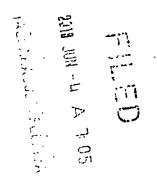
(Re	questor's Name)	.
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration So Division of Con				
	Formals, LLC			
SUBJECT:	Name of Lim	ited Liability Company	·	
	Amendment and fee(s) are sub ondence concerning this matter			
	Heidee L. Zamora			
		Name of Person		
	Heidee's Formals			
	<u> </u>	Firm/Company		
	6251 Philips Hwy. Suite 5			
		Address		
	Jacksonville, FL 32216			2218
		City/State and Zip Code	 	
	heideesformals@gmail.con	n to be used for future annual report notifi	cotion)	
For further information	concerning this matter, please c		canon,	
Heidee Zamora		904 7073639 at ()		
Name	of Person	Area Code Daytime	Telephone Number	Şî en
Enclosed is a check for	the following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &
M. II	INC ADDRESS.	STD FFT/COUDIA	D ADDRESS:	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Heidee's Formals, LLC				
(<u>Name of the Limited Li</u> (A Flo	ability Company as it now appears orida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liabili Florida document number L17000236296	ty Company were filed on No	vember 15, 2017	and as:	signed
This amendment is submitted to amend the following	ā:			
A. If amending name, enter the new name of the	limited liability company he	<u>re</u> :		
The new name must be distinguishable and contain the words	'Limited Liability Company," the de	esignation "LLC" or the a	abbreviation "L	.L.C."
Enter new principal offices address, if applicable:	<u> </u>	·····		
(Principal office address MUST BE A STREET AL	ODRESS)			
Enter new mailing address, if applicable:			23 JE	
(Mailing address MAY BE A POST OFFICE BOX			<u>,</u>	
B. If amending the registered agent and/or r registered agent and/or the new registered office :		our records, enter	the name	of the nev
Name of New Registered Agent:		-	· (/1	
New Registered Office Address:	C . 19	ida street address		
	tinler flori			
_	City	, Florida	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>	<u>Address</u>	Type of Action
Owner	Heidee L. Zamora	3948 Sereno Ct.	■ Add
		Middleburg, FL 32068	☐ Remove
			Change
AMBR	Heidee L. Zamora	3948 Sereno Ct.	≅ Add
		Middleburg, FL 32068	Remove
			☐ Change
MGR	Heidee L. Zamora	6251 Philips Hwy. Suite 5	≅ Add
		Jacksonville, FL 32216	:
			Change
			Remove
			Add
		-	Remove
			☐ Change
			Add
			□ Remove
			Change

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an effective date is his lote: If the date in:	ther than the date sted, the date must be sp serted in this block do e date on the Departm	ecific and cannot be ses not meet the ap	plicable statutory	or more than 90 days	optional) after filing.) Post, this date wi	ursuant to 605.	
iment's effective	e date on the Departm	nent of State's reco	ords.	Timg requirements	, tills date vi	n not be note.	
record specifi The 90th day a	es a delayed effe after the record is	ctive date, but s filed.	not an effecti	ve time, at 12:	01 a.m. on	the earlie	ır c
ated		. 2018	<u>.</u> .				
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Page 3 of 3

Filing Fee: \$25.00