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(Re	equestor's Name)	
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TO:	Registration Se Division of Cor				
SHR	JECT:	HIS IMPORTS LLC.			
30 Di	, i.e	Name of Limi	ited Liability Company		
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Pleas	e return all correspo	ondence concerning this matter	to the following:		
		Regina Campbell			
			Name of Person		
		LSCIENTIA INC.			
			Firm/Company		
		2000 Ponce De Leon	Blvd		
			Address		
		Coral Gables, FL 331	34 City/State and Zip Code		
		r.campbell@thecamp E-mail address: (t	obelllawgroup.com to be used for future annual r	report notificati	on)
For fi	urther information c	oncerning this matter, please ca	all:		
R	tegina Campbell		at (305)	328-9506	
	Name o	f Person	at (<u>305</u>) Area Code	Daytime Tel	ephone Number
Enclo	osed is a check for th	ne following amount:			
EE S	25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is encl		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

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

our records.) 25/2018 and assigned
25/2018 and assigned
ation "LLC" or the abbreviation "L.L.C."

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r records, enter the name of the 1
treet address
, Florida Zip Code

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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = 'Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	LSCIENTIA INC.	2000 Ponce De Leon Blvd	
		Coral Gables, FL 33134	⊠ Remove
			Change
MGR	LEGALOPINIONS.COM LLC	2000 Ponce De Leon Blvd 6th Floor	[3 Add
		Coral Gables, FL 33134	Remove
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(If an effective date	is listed, the date	e must be sp	ecific and	cannot	t be prior	to date of	filing or r	nore than 90	days after	filing.) Pu	rsuan	t to 60:	5.020
Note: If the date document's effe						ible stati	itory filir	ng requires	nents, this	date wil	not	be list	ted a
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Typed or printed name of signee

Filing Fee: \$25.00