

L18 0000 49207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

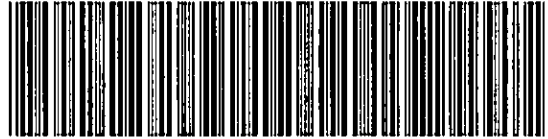
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/16/19--01040--015 **25.00

FILED
2020 MAR 23 AM 11:05
MAR 23 2020

Amend

MAR 24 2020

ALBRIGHTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Laumii 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:

Lauren Michele Byrd
Name of Person

Laumii LLC
Firm/Company

1777 Polk Street 2M
Address

Hollywood, FL 33020
City/State and Zip Code

Lauren.m.byrd@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lauren M. Byrd at (754) 204-1130
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 16, 2020

LAUREN MICHELE BYRD
1777 POLK STREET
HOLLYWOOD, FL 33020

SUBJECT: LAUMII LLC
Ref. Number: L18000049207

We have received your document for LAUMII LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Document is incomplete.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 620A00001315



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 MAR 23 PM 12:53

March 3, 2020

LAUREN MICHELE BYRD 2ND MAILING
1777 POLK STREET
APT. 2M
HOLLYWOOD, FL 33020

SUBJECT: LAUMII LLC
Ref. Number: L18000049207

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Irene Albritton
Regulatory Specialist II

Letter Number: 620A00001315

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

LAUMII 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 Company were filed on 2/23/19 and assigned
Florida document number L18000049207.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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

MGR = Manager
AMBR = Authorized Member

[illegible]

[illegible]

(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 filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Lauren M. Byrd
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Lauren m. Byrd

Typed or printed name of signee

Filing Fee: \$25.00