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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : 120010000062

Phone : (323)962-8600 Fax Number : (323)962-3889

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

25 Email Address: $\ddot{\circ}$ LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JASMINE KARAMEL LLC Certificate of Status 0 Certified Copy 1 05 Page Count \$55.00 Estimated Charge

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From: Sarah Acevedo

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November 8, 2021

FLORIDA DEPARTMENT OF STATE Division of Corporations

JASMINE KARAMEL LLC 30 E END AVE APT 3R NEW YORK, NY 10028US

SUBJECT: JASMINE KARAMEL LLC

REF: L18000077409

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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Valerie Herring Regulatory Specialist III FAX Aud. #: H21000411396 Letter Number: 721A00027149

From; Şarah Acevedo

COVER LETTER

TO: Registration So Division of Co			
	KARAMEL LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspond	ondence concerning this matter t	o the following:	
	Cheyenne Moseley		
		Name of Person	
	Legalzoom.com, Inc.		
		Firm/Company	
	101 N Brand Blvd 11th Fl		
		Address	
	Glendale, CA 91203		
		City/State and Zip Code	
	karolina.fashion7@gmail.co	on be used for future annual report notific	ention)
For firsther information	concerning this matter, please ca	·	, <u>, , , , , , , , , , , , , , , , , , </u>
	concerning this matter, prease ea		
Cheyenne Moseley \$00 773-0888 at () Name of Person Area Code Daytime Telephone Numb		12.1 L M	
Name (of Person	Area Code Dayune	Telephone Number
Enclosed is a check for t	the 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)
	LING ADDRESS:	STREET/COURIE Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Taliahassee, F1, 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Taliahassee, FL 32301

To: +18506176383

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L	iability Compa	ny as it now appears on our records)				
(A)	lorida Limited L	ny as it now appears on our records.) liability Company)				
The Articles of Organization for this Limited Liabi Florida document number <u>L18000077409</u>	lity Company	were filed on 03/26/2018	a	nd assig	med	
This amendment is submitted to amend the following	ng:					
A. If amending name, enter the new name of the	e limited liabi	lity company here:				
The new name must be distinguishable and contain the words	s "Limited Linbil	ity Company," the designation "LLC" or	the appreviat	ion "L.L	U."	
Enter new principal offices address, if applicable	թ.	8955 Collins Avenue				
(Principal office address MUST BE A STREET A		Apt. #402				
Transport office during the property of the pr		Surfside, FL 33154				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8955 Collins Avenue				
		Apt. π402				
		Surfside, FL 33154	_			
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:			nter the n	ame o	f the ne	
New Registered Office Address:	8955 Collins A	venue, Apt. ≠402	•	زنا	-	
		Enter Florida street address		Ġ)		
3	Surtside	, Florid	а 33154	•	;	
		City	Zip	Code		
				• • •		
			.*	: 2:		
New Registered Agent's Signature, if changing Registered a provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the registery company has been notified in writing of this change in the registery and the registery are registery as the registery and the registery and the registery are registery as the registery and the registery are registery as the registery and registery are registery as the registery and registery are registery as the registery are registery as t	gent and agre and complete red agent as p istered office	performance of my duties, and I provided for in Chapter 605, F.S	am famili Or, if this	compl ar with docur	and nent is	

Page: 6 of 7

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>	Address	Type of Action
AMBR	ZUBKUTE, KAROLINA		Add
		30 E END AVE APT 3R NEW YORK, NY 10028	⊟ Remove
			□ Change
AMBR	Karolina Shah	8955 Collins Avenue, Apt. #402 Surfside, FL 33154	≘ Add
			☐ Remove
			☐ Change
			□ Remove
			Change
			Add
			Remove
			Change
			□ Add
			☐ Remove
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From: Sarah Aceved
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05.0207 (3)(b) sted as the
lier of:

Page 3 of 3

Typed or printed name of signee

Karolina Shah

Filing Fee: \$25.00