## L18000 132114





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## **COVER LETTER**

TO:

| TO: Registration S Division of Co             |   |   |  |              |  |
|---|---|---|--|--------------|--|
|   | LY CHARMING TECHNOLOG                     | GIES, LLC   |  |              |  |
| SUBJECT:                                      | Name of Lim                               | ited Liability Company  |  |              |  |
| The enclosed Articles o                       | f Amendment and fee(s) are sub            | mitted for filing.  |  |              |  |
| Please return all corresp                     | condence concerning this matter           | to the following:   |  |              |  |
|   | JEANNIE C SCHMIDLE                        |   |  |              |  |
|   |   | Name of Person  |  |              |  |
|   |   |   |  | 202 <b>0</b> |  |
|   |   | Firm/Company  | 27.7   |              |  |
|   | 14199 SW 48TH COURT                       |   |  | 1"   1       |  |
|   |   | Address   | <u> </u>                                       | P .          |  |
|   | MIRAMAR, FL 33027                         |   | LOR II   | 2: 38        |  |
|   |   | City/State and Zip Code   | ***  | <b>ල</b> ව   |  |
|   | cattleya721@gmail.com                     |   |  |              |  |
|   | E-mail address: (                         | to be used for future annual report noti                            | fication)                                      |              |  |
| For further information                       | concerning this matter, please c          | all:  |  |              |  |
|   |   | at ( )  |  |              |  |
| Name  | of Person                                 | Area Code Daytim  | e Telephone Number                             | _            |  |
| Enclosed is a check for                       | the following amount:                     |   |  |              |  |
| ■ \$25.00 Filing Fee                          | S30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of Certified Copy (additional copy | f Status &   |  |
| Mailing Addre<br>Registration                 |   | Street Address:<br>Registration Se                                  | ction  |              |  |
| Registration Section Division of Corporations |   | Division of Cor   |  |              |  |
| P.O. Box 63                                   | 27  | The Centre of T   | •  |              |  |
| Tallahassee, FL 32314                         |   | 2415 N. Monroe Street, Suite 810                                    |  |              |  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| UNLIKELY CHARMING TECHNOLOGIES, LLC (Name of the Limited Liability Company)   | as it now appears on our records.)     |                       |
|---|--|-----------------------|
| (Name of the Limited Liability Company<br>(A Florida Limited Liab             | oility Company)                        |                       |
| The Articles of Organization for this Limited Liability Company we            | ere filed on                           | and assigned          |
| Florida document number L18000132114  |  |                       |
| his amendment is submitted to amend the following:                            |  |                       |
| A. If amending name, enter the new name of the limited liabilit               | y company here:                        |                       |
| UNLIKELY CHARMING, LLC  |  |                       |
| 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)                            |  |                       |
| <u>-</u>  |  |                       |
|   | 123                                    | 2028                  |
| Enter new mailing address, if applicable:                                     |  | ·                     |
| Mailing address MAY BE A POST OFFICE BOX)                                     | Di.                                    |                       |
| _   | (4) 27<br>(7) 74<br>20                 | $\frac{\omega}{2}$    |
|   |  | P. T                  |
| B. If amending the registered agent and/or registered office add              |  |                       |
| ngent and/or the new registered office address here:                          | in A                                   | <u>ဒ</u>              |
|   |  |                       |
| Name of New Registered Agent:   |  |                       |
| New Registered Office Address:  | Enter Florida street address           |                       |
|   | nnter Florida street address           |                       |
|   | Florida                                |                       |

## 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.

City

Zip Code

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 |
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| ctive date, if other than the date of filing:effective date is listed, the date must be specific and cannot be prior          | r to date of filing or n | (0]<br>iore than 90 days a | p <b>tional)</b><br>fter filing.) | Pursuant to 605.02   |
| e: If the date inserted in this block does not meet the applic<br>iment's effective date on the Department of State's records |                          | g requirements.            | this date v                       | will not be listed   |
| men s crossive date on the separation of state s reasons  | ,                        |                            |                                   |  |
| ord specifies a delayed effective date, but not an effective ti   | ime, at 12:01 a m        | on the earlier of          | (b) The                           | e 90th day after th  |
| filed.  |                          |                            | (0)                               | a a contract of the contract o |
| \   |                          |                            |                                   |  |
| d July 27 . 2020  | <u>_</u> .)              |                            |                                   |  |
|   | 1.401                    | ' /                        |                                   |  |
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Typed or printed name of signee