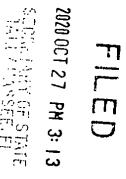
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(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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		 -
Special Instructions to I	Filing Officer:	





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COVER LETTER

TO:	Registration Sec Division of Corp			
cunu	n y negn	Mell	Warrior LLC	
SUBJI	ECT:		ited Liability Company	
The en	closed Articles of /	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
		<u>.</u>	nna Hyvarine Name of Person	<u>n</u>
			Firm/Company	
		<u>4200 S.C</u>	ocean Blvd, #	202
		annaj Ny	Blach FL 3345 City/State and Zip Code Varinth @ 9m to be used for future annual report not	all Com
For fu	ther information co	nncerning this matter, please ca	ail:	
	ma H	Yvavinen	at (<u>561</u>) <u>503</u> Area Code Daytii	ne Telephone Number
Enclos	ed is a check for th	e following amount:		
□ \$ <u>2</u>	5.00 Filing Fee	V \$30.00 Filing Fee & Certificate of Status Call lady Paul	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Street Address: Registration So Division of Co The Centre of 2415 N. Monro Tallahassee, F	orporations Tallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Well	Narrior LLC	- <u></u> -
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number <u>L 18000 136 5 22</u>	ompany were filed on6/1/20	01₹ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit AMARIE COACHING LL The new name must be distinguishable and contain the words "Limit	C	-the abbreviation "1 + C"
Enter new principal offices address, if applicable:	SCLIME	
(Principal office address MUST BE A STREET ADDR	ESS)	<u> </u>
Enter new mailing address, if applicable:	same	OCT 27 PH
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter th	e name of the new registered
Name of New Registered Agent:	mna Hyvarinen	
New Registered Office Address:	1200 S. Ocean Blv Enter Florida street address	1. #202
	Palm Beach, Flore	ida <u>33480</u> Zip Code
and the state of the second of the state of the state of the second of	l A monte	

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 Yew 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>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Remove
			Change
			□Add
			Remove To Change
			☐ Change
			
			□Remove
			☐ Change
			□Add
			Charm

							
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If an effective date is I Note: If the date in	other than the date of f isted, the date must be specifi iscrited in this block does in the date on the Department	ic and cannot be pri not meet the appl	or to date of filing c icable statutory f	r more man 90 days as	tional) der filing.) Pursua his date will no	unt to 605.02 of he listed	0°
e record specifies a rd is filed.	delayed effective date, bu	it not an effective	time, at 12:01 a.:	n, on the earlier of:	(b) The 90th	day after th	ıe
10/10	12020	—· //	·				
Dated 10/19		(60					
Dated 10/19	1 dun	1 Mh	thorized representa				

Filing Fee: \$25.00