L18000161364

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500340715435

02/14/20--01001--003 ++25.00

20 FFB 13 PH 3/54

PILED
2020 FEB 13 M 9: 19
SECRITARY OF SHARE

Y SULKER FEB 1 4 2020

COVER LETTER

TO:

Registration Section

Div	rision of Cor	porations				
SUBJECT:	Serenity Cu	ilture Company				
SUBJECT:	Name of Limited Liability Company					
en .						
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
		Michael Nazareth				
			Name of Person			
		Serenity Culture Corpor	1			
			Firm/Company			
		915 Railroad Ave				
			Address			
		Tallahassee, FL 32304				
		-	City/State and Zip Code			
		Menazareth@gmail.com				
For further is	tarmatian a	e-mail address: (oncerning this matter, please c	to be used for future annual report no	otification)		
		oncerning this matter, please c	an.			
Justin Hodge	28		954 8502581			
	Name o	f Person		ime Telephone Number		
Enclosed is a	check for th	ne following amount:				
№ \$25,00 F	iling 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 Addres		Street Address:			
	gistration S vision of C	orporations	Registration S Division of Co			
P.O). Box 632	7	The Centre of			
Tal	lahassee, F	FL 32314	2415 N. Monr	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Serenity Culture Company			
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on ou Liability Company)	ir records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000161364</u>			_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designat	ion "LLC" or the abbre	eviation "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)		SECRE TAIL AHASSI	7020 FEB 13
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records	s, enter the name of the name	of the new registere
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida stre	et address	
		Tile 24	
	City	, Florida	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 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	Matthew Nazareth	611 Tuten Trail	□Add
		Orlando, FL 3853 3282	18 ■Remove
			DChange
AMBR	Justin Hodges	817 Buena Vista Dr	\ \ Add
		817 Buena Vista Dr Tallahassee, FL 32304	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

	ny other information,	cinci cinai	ige(s) nere. (лися цашол	iai snecis, y ne	evessar <u>y</u> .)	
			_		•		
<u>—</u>		=		<u></u>		 -	
					-	<u></u>	
		<u> </u>			 _		
			<u> </u>				
						 _	<u></u>
			·	· <u> </u>			
	-	·					
						·	
 .			<u> </u>	-			
				 	 -	. <u>-</u>	
<u> </u>			<u>. </u>				_
			<u> </u>		<u></u>		
				<u> </u>			
(If an effective date Note: If the date	if other than the date is listed, the date must be sp e inserted in this block do ctive date on the Departn	ecific and can oes not meet	not be prior to da the applicable	nte of filing or mor statutory filing t	e than 90 days aff	tional) er filing.) Pursuant nis date will not b	to 605.0207 (3); e listed as the
the record specifies ford is filed.	s a delayed effective date	, but not an c	effective time,	at 12:01 a.m. on	the earlier of: ((b) The 90th day	after the
Dated Febr	Marky	hoffe	2020 ber or authorized	representative of	a member		_
	Michael	Now	ed or printed na	me of signee	·		