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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

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

Email Address: _____

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Missvasantiibaby, LLC	변호 전 4- VON EIOS
(Name of the Limited Liability Compa (A Florida Limited)	my as it now appears on our records.) Liability Company)
(A Florida Limited library) The Articles of Organization for this Limited Liability Company Florida document number L18000180235	were filed on 07/26/2018 ASULL. FLORIDA and assigned
The Articles of Organization for this Limited Liability Company	were med on
Florida document number L18000180235	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	307 Westchester Hills Lane
(Principal office address MUST BE A STREET ADDRESS)	
Tritequa office dadress, sies e Br. A. St. Kir. (A) (2700.5.5)	Valrico Florida 33594
Enter new mailing address, if applicable:	7901 4th St N
(Mailing address MAY BE A POST OFFICE BOX)	STE 300
	St. Petersburg FL 33702
B. If amending the registered agent and/or registered o	ffice address on our records, enter the name of the new
registered agent and/or the new registered office address her	<u>e</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Emer 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

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 = A	uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
		☐ Remove	
		☐ Change	
		D Add	
		☐ Remove	
		□ Change	
		□ Add	
		Remove	
		□ Change	
		Add	
		☐ Remove	
		☐ Change	
	,	☐ Remove	
			☐ Change
	41-31-21-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	☐ Remove	
		□ Characa	

). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
(If an e <u>Note:</u>	tive date, if other than the date of filing: [Tective 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 505,0207 (3): [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
If the re (b) Th	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dates	November 6 2019
	Signature of a member of authorized representative of a member
	Morgan Noble Typed or printed name of signee

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