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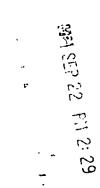
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COVER LETTER

		istration Sec sion of Corp			
CUBIEC		Sonkissed L			
SUBJEC	.1:	 -		ited Liability Company	_
The enclo	osed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn	all correspor	ndence concerning this matter	to the following:	
			Elizabeth F Sturdon		
				Name of Person	
			Sonkissed LLC		
				Firm/Company	
			1971 W. Lumsden Rd #33	I	
				Address	<u>.</u>
			Brandon, FL 33511		
				City/State and Zip Code	
			sonkissedlle@yahoo.com		_
			E-mail address: (to be used for future annual report notification)	
For furth	er ir	iformation co	oncerning this matter, please ea	all:	
Elizabetl	h F.	Sturdon		614 599-0344 at ()	
		Name of	Person	Area Code Daytime Telephone Num	iber
Enclosed	is a	check for th	e following amount:		
■ \$25.	.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee, icate of Status & ied Copy onal copy is enclosed)
	Reg Div P.C	iling Address gistration S vision of Co D. Box 632' lahassec, F	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite	c 810
		, -		Tallahassee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records. (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 12/28/2018	and assigned
lorida document number L19000002299	
'his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
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)	
	ري. منــــــــــــــــــــــــــــــــــــ
	27 27 28
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	, 1/2
	29
B. If amending the registered agent and/or registered office address on our records, <u>enter tagent and/or the new registered office address here:</u>	
Name of New Registered Agent:	
New Registered Office Address: Enter Florida street address	
Enter Florida street address	
, Flor	rida

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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Andrew Sturdon	1971 W. Lumsden Rd. #331	≣ Add
		Brandon, FL 33511	□Remove
			□Remove
			<u>₹</u> iChange
			Change SIDAdd 22
			ERemóve ∴
			i Ge hange
			□Add
			Remove
			⊡Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			Change

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	: 29
ctive date, if other than the date of filing:	(optional) o date of filing or more than 90 days after filing.) Pursuant to 605.02 ble statutory filing requirements, this date will not be listed a
ord specifies a delayed effective date, but not an effective tim filed.	ie, at 12:01 a.m. on the earlier of: (b) The 90th day after th
September 17 2021	
Llingabeth 7 Strong Signature of a member or authori	lon