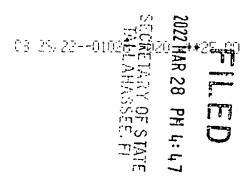
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COVER LETTER

Division of Corporations
SUBJECT: Glamtique Fashions By Kre Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
La Kreasha Cunningham Name of Person
Glantique Fabrions By ICIL
41054 East State Rd 64 suite 223
Bradenton Fl 34-208 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lacabha Cunningham at (94), 557-944 Name of Person at (94), Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Street Address: Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Registration Section

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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	FILED
Kro Minko IIc.	2022 HAD 22
(Name of the Limited Liability Compa (A Florida Limited I	inhility Company)
(A Fiorida Cililled L	SECRETARY TO
The Articles of Organization for this Limited Liability Company	were filed on LOY OVALANASE BUT and assigned
Florida document number 190035802)
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
C-Lamfigure, Eastions By Kr	0,
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4:054 Foot State Vd 104
• •	DI 11ta 223
(Principal office address MUST BE A STREET ADDRESS)	15/1 de 11/10/10 El 3/1/200
	DINGUIUN THUTAUD
	1,051 teach ataloud 101
Enter new mailing address, if applicable:	Cititi 200
(Mailing address MAY BE A POST OFFICE BOX)	14: (C) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A
	101000110111 34208
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	iddress on our records, enter the name of the new registered
agent analog the new registered office address nere.	
Name of New Registered Agent:	
Name of New Registered Agent.	
New Registered Office Address:	Enter Florida street address
	, Florida City Zip Code
	Sour CAR COME

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
			□Add
			□Remove
			□Change
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an effe lote:	we date, if other than the date of filing:
record Lis filo	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ated _	March 21st 2023.
	Signature of a member or authorized representative of a member