L190000 62787

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COVER LETTER

TO:	Registration Section Division of Corpor			
SUBJE	ст: <u>Luna</u>	LOVE L. L. C.	ted Liability Company	
The end	dosed Articles of An	nendment and fee(s) are subm	nitted for filing.	
Please t	eturn all corresponde	ence concerning this matter t	o the following:	
		Yasmin Es	Pinal Name of Person	
			Firm/Company	
		6503 NW 11 Margate, FL	6 th St Address	
		Margate, FL	33063 City/State and Zip Code	
	-	Luna love Cold E-mail address: (6	o be used by future annual report notific	ration)
For furt	her information conc	erning this matter, please ca	II:	
<u>(eg</u>	lia Espinal Name of Pe	rson	at (<u>754</u>) <u>600 - </u> Area Code Daytime	7700 Telephone Number
Enclose	ed is a check for the f	ollowing amount:		
2 \$25	.00 Filing 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)

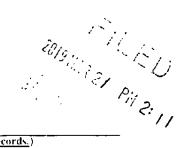
MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Luna Love L.L.C	
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp	pany were filed on Much 15 2019 and assigned
Florida document number <u>L190000 62787</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
Tasmin A Council	
	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6503 NW 16th St
Principal office address MUST BE A STREET ADDRESS	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	ed office address on our records, enter the name of the ne
	 -
Name of New Registered Agent: \uSn	nin A. Epinal
New Registered Office Address: 6503	NW 16th St Enter Florida street address
maga	te Florida 38063

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 hanging 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 Title **Name** Address Type of Action Yasmin A. Espinal 6503 NW 16 +h St, Muga let L 33000 Add ☐ Remove MGR Cecilia Espinal 6503 NW 16+4 St, Margaly \$133063 1 Add ☐ Change ☐ Remove _ Change □ Add _□ Remove _D Change □ Remove _□ Change _□ Remove

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	d in this block does	s not meet the applica	able statutory filing requiren	days after filing.) Pursuant to 605.0 nents, this date will not be listed
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Filing Fee: \$25.00