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## **COVER LETTER**

TO: Registration S Division of Co				
radically h	nappy He			
NUBJECT:	Name of Lim	nited Liability Company		
The enclosed Articles o	f Amendment and fec(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following.		
	david granados			
	-	Name of Person		
	radically happy lle			701
	·	Firm/Company		9 49
	1060 WOODCOCK RD S	TE 128 #22134		2019 APR 18 AM 10: 54
		Address		₹ O
	ORLANDO, FL 32803			7 5 <b>5</b>
	info@us.office201.net	City/State and Zip Code		# <b>4</b>
		to be used for future annual report not	ification)	
For further information	concerning this matter, please or	all:		
david granados		507 4910380		
Name	of Person	at () Area Code Daytin	ne Telephone Number	
Enclosed is a check for	the following amount:			
S25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
	JNG ADDRESS: tration Section	STREET/COURI Registration Section		

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

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1, 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

radically happy lle	
( <u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records.)  Limited Liability Company)
The Articles of Organization for this Limited Liability Co	mpany were filed on 04/04/2019 and assigned
Florida document number L19000093727	
This amendment is submitted to amend the following:	2019
A. If amending name, enter the new name of the limit	ed liability company here:
The new name must be distinguishable and contain the words "Limit	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRI	ESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office address.	ered office address on our records, <u>enter the name of the new</u> ess here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida City Zip Code
New Registered Agent's Signature, if changing Registered	

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>	Name	Address	Type of Action
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Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the Do	t be specific and cannot be pricock does not meet the appli	cable statutory filing	(optiona re than 90 days after filin requirements, this dat	g.) Pursuant to 605.0	)207 (3 Las th
he record specifies a delayed The 90th day after the reco	effective date, but nord is filed.	ot an effective ti	me, at 12:01 a.m	. on the earlier	r of:
Dated april 16	2019				
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Dated	~ 1	huha			

Page 3 of 3

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