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JUN 22 2020

COVER LETTER

Tallahassee, FL 32314

	Registration Division of C	Section Corporations		
CHD IEC	Gypsy L	ovely LLC		
SUBJEC	· I	Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. Sonya Hester Name of Person		
The encle	osed Articles	of Amendment and fee(s) are sul	bmitted for filing.	
Please re	turn all corres	spondence concerning this matter	r to the following:	
		Sonya Hester		
			Name of Person	
		Gypsy Lovely LLC		
			Firm/Company	
		1121 Ozark Ct.		
			Address	
		Apopka, FL 32712		
			City/State and Zip Code	
			2. 1	
For furth	er informatio			ouncation)
Sonya H				
	Nam	ie of Person	at () Area Code Dayt	time Telephone Number
Englosed	Lis a check fo	or the following amount:		
			T \$55.00 Piling Pag 9	E 60 00 Elling Em
L \$25.	00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Address: Registration Section Division of Corporations		Street Address: Registration S		
		Division of C		
	P.O. Box 6		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2322 *** -5 Pil 4: 67

Gypsy Lovely, LLC			
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on ou d Liability Company)	r records.)	
The Articles of Organization for this Limited Liability Compar Florida document number 1.19000099000	ny were filed on 4/10/2019	and assigned	
This amendment is submitted to amend the following:			
A. It amending name, enter the new name of the limited lia	bility company here:		
Wild One Designs, LLC			
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designati	on "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(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 registered office agent and/or the new registered office address here:	e address on our records	i, enter the name of the new registere	
agent analytic tie new registered office address need.			
Name of New Registered Agent:			
Name of New Registered Agent.			
New Registered Office Address:	Entar Florida etra	ust avldman	
	Enter Florida street address		
	Cin	, Florida	
N. B. C. L. A. G. L. W. L. B. C. L. B.	City	Zip Соси	
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and comple	•		

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
	Eume		□Add
			□ Remove
			[]Change
			□Add
			□Remove
			
			□Add
			□ Remove
			[]Change
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			Петюче

Page 2 of 3

If amending any other inform		•		
				
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Effective date, if other than th	e date of filing:	o date of filing or more tha	optional)	tto 605 0207
Note: If the date inserted in this I document's effective date on the	plock does not meet the applical			
ne record specifies a delaye The 90th day after the re		an effective time,	at 12:01 a.m. on the	earlier of
Dated	2020	_,		
<u> </u>	Signature of a member or althor	Legis fized representative of a m	C/V	-
	Sonya L. H	·	ever ve t	
	_	d name of signee		

Page 3 of 3

Filing Fee: \$25.00