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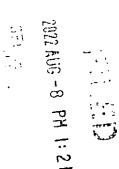
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COVER LETTER

TO: Registration S Division of Co		•					
emprect.		HAND LLC					
SUBJECT:		ed Liability Company					
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.					
Please return all corresp	ondence concerning this matter to	o the following:					
		ROSA E. LEON					
TO YOUR HAND LLC SUBJECT: 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: ROSA E. LEON Name of Person Firm/Company 16132 NW 14TH COURT Address PEMBROKE PINES, FL 33028 City/State and Zip Code ROSSIE LEON@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ROSA ELENA LEON Name of Person ROSA ELENA LEON PS4 Area Code Daytime Telephone Num Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy Certified Copy Certificate of Status Certified Copy Certified Co							
		Firm/Company					
	16	132 NW 14TH COURT					
		Address					
	РЕМВ	ROKE PINES, FL 33028					
		•	.				
		-	fication)				
For further information of	concerning this matter, please cal	11:					
ROSA ELENA LEON							
Name (of Person		e Telephone Number				
Enclosed is a check for t	he following amount:						
□ \$25.00 Filing Fee		Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
Mailing Addre Registration Division of O	Section Corporations	Street Address: Registration Sec Division of Cor	porations				
P.O. Box 632	27	The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1() YOUR HAND LLC	
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on <u>04-17-2019</u>	and assigned
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the lim	ited liability company here:	
LUMVITA INTERNATIONAL LLC		یہ
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or	, , , , , , , , , , , , , , , , , , , ,
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDR	RESS)	
		T mi
Enter new mailing address, if applicable:		1:21
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered gent and/or the new registered office address here:	d office address on our records, <u>enter the</u>	name of the new registo
Name of New Registered Agent:		
New Registered Office Address:	Enter Floridu street address	
		a Zip Code
	Cuis	гір Сойс

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.

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ective date, if other than th		ling:	31, 2022			ptional)		
effective date is listed, the date m e: If the date inserted in this l ument's effective date on the	olock does no	ot meet the app	licable stat					
cord specifies a delayed effect s filed.	ive date, but i	not an effective	e time, at 1:	2:01 a.m. on t	he earlier o	î (b) Ti	1e 90th (lay after th
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Typed or printed name of signee