L19000125887

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SECRETARY OF STATE

3/30/21

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Rich Girl Sleepwear LLC 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:
Loren L. Fayson
Rich Girl Sleepwear LLC
6040 Raleigh St #2105
Orlando FL 32835
City/State and Zip Code Fay Son 84 @ Notmail. Com E-mail glidress: (to be used for future annual report notification)
For further information concerning this matter, please call:
LOren Fayson at (321) 230.3485 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Street Address: Registration Section

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

ARTICLES OF ORGANIZATION OF

2021 FEB -9 AM 9:21

Rich Girl Sleepwer	SEURE IARY OF STATE TALLAHASSEE, FL
(Name of the Limited Liability Company as it now appears on o	ur records.)
(A Florida Limited Liability Company)	

The Articles of Organization for this Limited Liability Company were filed on May 9, 2019 and assigned Florida document number <u>L1900012588</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being addedress of each person</u> <u>addedress of ea</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			Change
		□Remove	
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(If an ef Note:	ive date, if other than the date of filing: Thursday 3 2021 (optional) (optional) (ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the lent's effective date on the Department of State's records.
the recor	d 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 led.
Dated	August 3rd 2020 Signature of a member or authorized representative of a member
	Loren L. Fauson Typed or printed name of signee

Filing Fee: \$25.00