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COVER LETTER

SHR IECT.	HAPPY Homes,	LLC							
Name of Limited Liability Company									
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.							
Please return all corre	spondence concerning this matter	to the following:							
	Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: Randi Zucker Name of Person AROR HOLDENG LLL Firm/Company 10733 Maple Lhase Drive Address Boundard Randi Full 33498 City/State and Zip Code Randi Zucker & gmail-com E-mail address: (to be used for future-arinual report notification) formation concerning this matter, please call: 11 Zucker at (561) 319-1135 Name of Person Area Code Daytime Telephone Number check for the following amount:								
		Name of Person							
	ARDR 1-	WIDENG LLC							
		Firm/Company							
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	Randi. Z E-mail address: (1	Pucker @ gmail- to be used for future-enhald report noti	fication)						
For further informatio	·	·	,						
Randi	Zucker	a(561) 319.	-1135						
Nam	e of Person	Area Code Daytim	e Telephone Number						
Enclosed is a check fo	r the following amount:								
S 25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy						

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

[N]

HAPPY HOMES LLC	Company as it now appears on our records.) imited Liability Company)
(Name of the Limited Liability	Company as it now appears on our records.) imited Liability Company)
(A Florida I.	imited Liability Company)
The Articles of Organization for this Limited Liability Cor	Company as it now appears on our records.) imited Liability Company) mpany were filed on 07/09/2019 and assigned
Florida document number <u>L19000177061</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	ed liability company here:
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
•	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	<u></u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of	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
	, Florida
	City Zin Code

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 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
MGR	Viralhaze LLC	1200 Brickell Bay Prive	CX4dd
		# 2715 Miami, FL 33131	□Remove
			□Change
			□Add
			□ Remove
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	he date ir	serted in	this bloc	k does no	ot meet th	ie applical				90 days a) 3.) Pursuant to 60 e will not be lis	
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