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## **COVER LETTER**

Div	ision of Cor	porations	•	•.	
SUBJECT:	TvyLo LLC				
		Name of Lin	nited Liability Company	-	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ondence concerning this matter	to the following:		
			Ivonne Lopez		
			Name of Person		
			Firm/Company	_	
		8	(760 SW 133rd Ave Rd. A	.pt 214	
		· · · · · · · · · · · · · · · · · · ·	Address		
			Miami, FL 33183		
			City/State and Zip Code ivlopezzzz@gmail.com		
		E-mail address: (	to be used for future annual i	eport notification)	
For further in	iformation e	oncerning this matter, please ca	all:		
	Ivonne	Lopez	786 at ( )	438-7336	
	Name o	f Person	Area Code	Daytime Telephone	Number
Enclosed is a	check for th	ne following amount:			
■ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is encl	osed) C	0.00 Filing Fee, ertificate of Status & ertified Copy ddutonal copy is enclosed
	MAIL	ING ADDRESS:	STREET	/COURIER ADDR	ESS:

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

TO:

Registration Section

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	IvyLo LLC		<u>≥</u>	
(Name of the Limi	ted Liability Company as it now appears (	on our records.)		
	(A Florida Limited Liability Company)		300	
		73110		
The Articles of Organization for this Limited !	liability Company were filed on	7.31,19 	and assigned	
Florida document number	5			
i winda document mantoer	<del></del>			
This amendment is submitted to amend the fol-	lowing;		MI 8: 20	
	•		37 6	
A. If amending name, enter the new name of	f the limited liability company here	4 *		
The new name must be distinguishable and contain the	and the last of the last the Community of the Last	anation "LLC" as I	ha abbrariation "L. L. C. "	
the new name must be distinguishable and contain the	words trained training Company, the desi	ghaddii 1200 de t	ne anoteviation (2.13.c.)	
Enter new principal offices address, if appli	cable:			
	_			
(Principal office address MUST BE A STRE)	<u> </u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BOX)			
	<del></del>			
B. If amending the registered agent and	· · · · · · · · · · · · · · · · · · ·	our records, <u>er</u>	iter the name of the r	
registered agent and/or the new registered o	ffice address here:			
Name of New Registered Agent:	Ivonne Marie Lopez			
name of New Negistered Agent.				
New Registered Office Address:	8760 SW 133rd Ave Rd Apt 214			
incompanies and the second	Enter Florida street address			
	Minni		22192	
	Miami	, Florid:	1 20100	
	City		Zip 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. Thereby 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 a for removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Actio
OWNER	Ivonne Marie Lopez	8760 SW 133rd Ave Rd Apt 214	<b></b> Add
			□ Remove
			☐ Change
			Remove
			Change
			Add
			□ Remove
			☐ Change
			Remove
			Change
			Remove
			Change
			Add
			Remove
			Change

Effective date, if other than the date of filing:  (Us an effective date is listed, the date on the specific and cannot be price to date of filing or more than 90 days after filing.) Persuant to 645,0207 More: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records.  The effective date and the defective date, but not an effective time, at 12:01 a.m. on the earlier of:  The 90th day after the record is filed.  Dated  August 20th  Signature to suncheber or authorized representative of a member		<del></del>
Effective date, if other than the date of filing:		
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	) The 90th day after the record is filed.	
Signature of a member or authorized representative of a member	Angust 20th 2010	
Signature disa-member or authorized representative of a member	Angust 20th 2010	
	Angust 20th - 2010	

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Typed or printed name of signee

Filing Fee: \$25.00