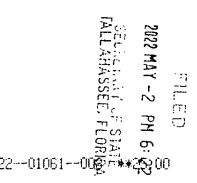
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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JUN 2 2 2022 S. PRATHEI

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	Filt	Massage 1	.L.C.	
Sobrect.		Name of Limited	Liability Company	
The enclosed Articles of	`Amendment	and fee(s) are submit	tted for filing.	
Please return all corresp	ondence conc	erning this matter to	the following:	
		Samuntha	St. Fleux Name of Person	
			Firm/Company	
		170 NW	122ND ST Address	
		Miumi	FL 33168 City/State and Zip Code	·····
		E-mail address: (to b	89 @ Gmail . Com be used forhuture annual report noti	fication)
For further information (concerning thi	s matter, please call:		
Samantha Name o	St.Fley	UR	at (30,5) 763 - Area Code Daytim	2855 e Telephone Number
Enclosed is a check for t	he following	amount;		
\$25.00 Filing Fee		Filing Fee & Teate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration	Section		Street Address: Registration Sec	
Division of C P.O. Box 632		>	Division of Cor The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	O1	
		AH, MAY
Fitt Massage LIC		- SSS
(Name of the Limited Liab	ility Company as it now appears on our ida Limited Liability Company)	AY -2 Ph
(AT I W.	can canned islamity company?	F.S.
The Articles of Organization for this Limited Liability	Company were filed on09/0	MAY -2 PH 6:022 AHASSEE, FLORIDA
Florida document number <u>L 190002246049</u>	<u> </u>	0A 0A
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
Fii+ Massage LLC. The new name must be distinguishable and contain the words "L.	imited Liability Company." the decimation	a "LLC" or the abbreviation "LLC"
The new name must be distinguishable and contain the words 1.	mined maining Company. The designation	i Elect of the ampresiation (Electrical
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	-	
thanny maness that the state of the body		
		
B. If amending the registered agent and/or register	red 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:		
isen, regimered syrrice returness.	Enter Florida street	address
		Florida
	City	Florida 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. 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
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
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			□Remove
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			∏Change

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ffective date, if other than the date	of filing:	(optional)
an effective date is listed, the date must be sp	pecific and cannot be prior to date of filing or more than t	90 days after filing.) Pursuant to 605.0207
ocument's effective date on the Departr	oes not meet the applicable statutory filing requirement of State's records.	ements, this date will not be listed as
record specifies a delayed effective date	but not an effective time, at 12:01 a.m. on the ea	arlier of: (b) The 90th day after the
Lis filed.		
		202 TAL
ated April 26	. 2022	2022 MAY -2 PH 6: 2
L,		MAY -2 AHASSE
	46	AN -2 P
(Signa	ntha St. Flask Typed or printed name of signer	nber C
	allo St Flage	L01 2.15 6:
Oama	Throad or printed purposed sign as	음구 2: