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SECRETARY CORPORATIONS

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COVER LETTER

Divi	istration Sec sion of Corp	oorations *		4
SUBJECT:	Мот	IVATED LIVING GI	ROUP LLC ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed	Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
-		Rosi	ERI R YAP Name of Person	
		•	Name of Person	
-		MOTIVATED LIV	Firm/Company	
			Firm/Company	···········
		680 BALLARI	Deive	
			Address	
		MELBOURNE 1	/FL 32935 City/State and Zip Code	
		E-mail address: (t	AP30 GMPL. COM	ort notification)
For further in	formation ec	ncerning this matter, please ca	ıll:	
K	OBERS)	2 Yr	at (<u>407</u>) 9	10 . 6057
	Name of	Person	Area Code 1	Daytime Telephone Number
Enclosed is a	check for the	e following amount:		
.25.00 Fi	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee. FL 32314

Street Address: 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

MOTIVATED LIVING GROUP (Name of the Limited Liability Control (A Florida Limited)	LLC
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	y were filed on October 25, 2019 and assigned
Florida document numberL19000267945	, c
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	MELBOURNE, PL 32935
(Principal office address MUST BE A STREET ADDRESS)	MELBOURNE, FL 32935
Enter new mailing address, if applicable:	C80 BALLARD DRIVE MELBOURNE, FL 32935
(Mailing address MAY BE A POST OFFICE BOX)	MELROURNE, FL 32935
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	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, 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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
·			□Add
			Remove
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tote: II t	the date inserted	than the date the date must be sp d in this block do e on the Departn	oes not meet	t the applicab	date of filing or le statutory fili	more than 90 da ng requiremen	(optional) ys after filing.) nts. this date v	Pursuant to 605.020 will not be listed a
record sp Lis filed.	pecifies a delay	ed effective date.	, but not an	effective time	e, at 12:01 a.m	on the earlie	rof: (b) The	90th day after the
ated	AUGUST	11 *	The .	2022	ed representativ			
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		Signat	ure of a men	iber or authorn	zed representativ	e of a member	_	