

To:

Page: 1 of 4

2024-11-21 12:01:49 UTC+14

18506176383

From: ZenBusiness User

L20000060910

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000386145 3)))



H240003861453ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.
Account Number : I20230000190
Phone : (844)449-3624
Fax Number : (512)597 0678

FILED
2024 NOV 21 PM 5:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2024 NOV 21 AM 9:11

DEPT OF STATE
DIVISION OF CORPORATIONS

*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
A LAVENDER LIFE LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

K. SALY

NOV 22 2024

Electronic Filing Menu

Corporate Filing Menu

Help

H24000386145 3

2024-11-21 12:01:49 UTC+14 18506176383
ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

From: ZenBusiness User

FILED
2024 NOV 21 PM 5:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A Lavender Life LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/24/2020 and assigned
Florida document number 120000060910

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 "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

10545 Dillon Ave, Hastings, FL 32145

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

10545 Dillon Ave, Hastings, FL 32145

(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, 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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

FILED
NOV 21 PM 5:12
TALLAHASSEE FL 32301
REC'D
CLERK OF CIRCUIT COURT

From: ZenBusiness User

2024 NOV 27
SECRET
TALLAHASSEE
FLORIDA

FILED
2024 NOV 21 PM 5:12
SECRET
TALLAHASSEE
FLORIDA

(If an effective 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)(b)

If the record 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 record is filed.

/s/ Dawnette Sheplock

Dawnette Shephard

Page 3 of 3

Filing Fee: \$25.00

1121000386145 3