L20 00007144

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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05/04/20--01010--014 *

SO to the



TO: Registration So Division of Co			
THE GRA	reful lotus flowers L	LC	1.20
SUBJECT:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	YUSMARY ROSALES		
		Name of Person	·
	THE GRATEFUL LOTUS	S FLOWERS	
		Firm/Company	
	2923 NE 42ND RD		
		Address	
	OCALA/FL 34470		
		City/State and Zip Code	
	THEGRATEFULLOTUSF	•	
For further information o	e-mail address: (to be used for future annual report not all:	ification)
FELIX CELIS		352 5192269	
Name of Person		Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)
Mailing Address Registration S		<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of T	
Tallahassee, 1	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

TO:

2020 HAY -4 AM 8: 03

THE GRATEFUL LOTUS FLOWERS 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 Liab	ility Company were filed o	on MARCH 04,2020 and
Florida document number L20000071442		
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	ne limited liability compa	ny here:
The new name must be distinguishable and contain the word	s "Limited Liability Company,	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
		and and an all an arranged by
B. If amending the registered agent and/or regi agent and/or the new registered office address t		our records, enter the name of the
•		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Ent	er Florida street address
		. Florida
-	City	Zip Co

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 concern provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this debeing filed to merely reflect a change in the registered office address, I hereby confirm that the limited lia company has been notified in writing of this change.

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Typ</u>
AMBR	YUSMARY C ROSALES	2923 NE 42ND RD OCALA,FL 34470	□
			=
			
	·		
			

FLOWERS" AND	HER TITLE IS AUTHORIZED MEMBER.
FELIX G CELIS IS	S A MINOR STOCKHOLDER/ADMINISTRATIVE DUTIES OF "THE GRATEFUL LOT
FLOWERS LLC'	
tive date, if other	than the date of filing: (optional) he date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to
: If the date inserted	In this block does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.
ment s encenve date	. on the Department of State & records.
ord specifies a delaye	ed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a
	2020
d APRIL 29	$\frac{2020}{2}$
d APRIL 29	1 2020 · · · · · · · · · · · · · · · · ·

Typed or printed name of signee