

L20000110656

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

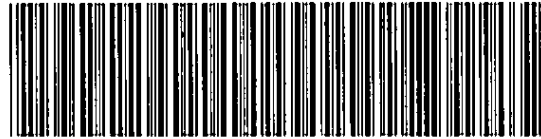
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/20/20--01013--021 **80.00

2021 MAY 10 AM 6:41

Amend
Name chg

O SIMMONS
MAY 21 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2021 MAY 10 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FL

April 13, 2021

ELESHIA SLY
623 WESTON RD
LEHIGH ACRES, FL 33936

SUBJECT: GODDESSLY OF SAE LLC
Ref. Number: L20000110656

We have received your document for GODDESSLY OF SAE LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CO." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 621A00007578



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2021

ELEISHIA A. SLY
623 WESTON ROAD
LEHIGH ACRES, FL 33936

SUBJECT: GODDESSLY OF SAE LLC
Ref. Number: L20000110656

We have received your document for GODDESSLY OF SAE LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L100000093629 - ELYSIAN LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 921A00000976

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Goddessly of SAE LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eleshia A. Sly
Name of Person

Goddessly of SAE
Firm/Company

623 Weston Road
Address

High Acres FL 33936
City/State and Zip Code

GoddesslyofSae@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eleshia A Sly at (469) 805-0085
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 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**

Goddessly of SAE LLC JAN 10 AM 6:42
(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 Apr 123 2021 and assigned Florida document number 120000110656.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Elysian Vibes LLC
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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

623 Weston Road
High Acres, FL
33936

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

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

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Service: Online Retail; Online Spiritual
Wellness Shop

E. Effective date, if other than the date of filing: Dec. 1st 2022 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated Nov. 14th, 2022.



Signature of a member or authorized representative of a member

Eleonora A. Sly

Typed or printed name of signee