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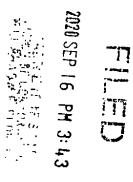
(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	WAIT	MAIL
(Ru	siness Entity Name)	
(50	isiness Emily Name,	
	A Ni will a	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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OCT 24 2020 S. YOUNG

COVER LETTER

TO: Registration Sec Division of Corp			·
SUBJECT:	MOHT PSS S	ited Liability Company	
		. , ,	
The enclosed Articles of A	Amendment and fee(s) are subt	mitted for filing.	
Please return all correspor	dence concerning this matter (to the following:	
	Ibisisa	— SMHH Name of Person	
	The matter	Yes Spott	
	<u>2215 9+1</u>	2 St Sbuth Address	·
	St peters Osmith-	City/State and Zip Code 7 DOT CI UU	eation)
For further information co	neerning this matter, please ca	ill:	
TO SIX	Smith	at (201) 300 Daytime	Telephone Number
Enclosed is a check for the	: following amount.		
1 \$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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	OF SP TI	
	SOO +1 sam abit now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 133.0		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "L.L.C." or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	Donth- 72 accoud won	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3215 9th st south Stretershung of 33700	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	office address on our records, <u>enter the name of the new</u> <u>re</u> :	
Name of New Registered Agent:	ley Harris	
New Registered Office Address:	Enter Florida street address)
Stipe	Arybury Florida 33705 Zip Cook	
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	

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.

f 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>	<u>Name</u>	Address	Type of Action
Agent	LOSalle Turnge	list	
U	·	2505 lynn lake	B Bemove
	· ·	3505 lynn lake Circle swith Apt C St pete H 33705	Change
Wher.	Hishley Harris	22159th st-50 3-Dete +133705	_04
			Remove
		2215 9th St South St Petersburg-P13	7 10 e hange 3705
			□ Remove
			Change
			_□ Add
			□ Remove
			_ □ Change
			D Add
			_□ Remove
			Change
			D Add
			_□ Remove
			_□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
I need Laselle Turnquist name
removed Off the mattress spo-A
business on subiz and add
Ashley Harris as the registered
agent-oddress ag 15 9th St south
St petersburg-A 33705 I CISO need
to add the tIn number 95-0834562
and the new address to the business
15 2015 9th St South Sit Detersburg of
33705.
E. Effective date, if other than the date of filing:
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 9 2 200 Sw
Signature of a member or authorized representative of a member Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00