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(Re	equestor's Name)	
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration S Division of Co				
	lywork by Angelina LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Angelina Bacon Smith			
		Name of Person		
	Gifted Bodywork by Ange	lina LLC		202
		Firm/Company		_ T
	950 S. Pine Island RD	Suite A150	P. F.	7021 JUN 30 P
		Address		
	Plantation, FL 33324		E STA	PH 1: 13
		City/State and Zip Code		ယ
	ANGELINABACON@YA		·	
		to be used for future annual report noti	ification)	
For further information	concerning this matter, please c	all:		
Angelina B. Smith		754 214-8818		<u></u>
Name of Person		Area Code Daytin:	ne Telephone Number	
Enclosed is a check for	the following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing F Certificate of S Certified Copy (additional copy i	Status &
Mailing Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Con The Centre of T 2415 N. Monro	rporations	
Tallahassee,	FL 32314	2415 N. Monro Tallahassee, FI		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gifted Bodywork by Angelina LLC				
(Name of the Limit	ed Liability Compa (A Florida Limited	any as it now appears on our rec Liability Company)	ords.)	
The Articles of Organization for this Limited L Florida document number L200014 This amendment is submitted to amend the following the content of the conten	+7231	were filed on June,	1, 20,30 and assigned	
A. If amending name, enter the new name o	f the limited liab	ility company here:		
Gifted Hands by Angelina LLC			🖼	
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "I		
Enter new principal offices address, if applic		SAME AS ABOVE	JUN 30	
Principal office address MUST BE A STREE	<u>T ADDRESS)</u>		SSO R	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1170 Sussex Drive #1105	1: 13	
		North Lauderdale, FL 3306	8	
B. If amending the registered agent and/or ragent and/or the new registered office address		address on our records, <u>en</u>	ter the name of the new registered	
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
	Enter Florida street address			
	N/A	,	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 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
N/A	N/A	N/A	
			□ Remove
			Remove SECREMARY ATTALLATION
			AHIASSEE. FILES
			☐ Change
			□Add
			Remove
			Change
			□Remove
			Change
			🗀 Remove
			□Change

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Effective	date, if othe	r than the d	ate of filing	;:			(opt	ional)	
Note: If i	ive date is listed the date insert t's effective da	ed in this bloc	k does not m	eet the appli	cable statute	ung or more the ory filing requ	in 90 days and iirements, th	is date will n	ot be listed as
record s	specifies a dela l.	yed effective (date, but not	an effective	time, at 12:0)La.m. on the	earlier of: (b) The 90th	day after the
Dated <u>0</u>	Dune A) 2	<i>9</i>	202	<u>/</u> .				
	-1	0	R		\bigcirc		L		

Typed or printed name of signee