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Registration Sec Division of Corp				
ct: Mascei	tric Creations Name of Lim	LLC ited Liability Company		
losed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
eturn all correspor	idence concerning this matter	to the following:		
	<u>Merlis</u>	Name of Person		
	Masco	HTIL CHATIONS Firm/Company		~2
	1670 NW 2nd	Terrace Address	SECRETA	7021 JAN 12
	Pompano B	City/State and Zip Code 2@ gmail Com	- <u> </u>	2 PH 2: 04
	mer lissap.9	20 gmail 000 to be used for future annual report noti	fication)	±10 %
irther information co	oncerning this matter, please ca	·		•
Mexis So Name of	Pierce	at (<u>Q54</u>) <u>805</u> Area Code Daytim	7198 e Telephone Number	
sed is a check for th	e following amount:			
325.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Cop (additional copy	f Status & py

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

TO ARTICLES OF ORGANIZATION OF

Mascentric Creations L	LC
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)
ticles of Organization for this Limited Liability Company w document number <u>L2000170178</u> .	ere filed on . 56/18/2020 and assigned
nendment is submitted to amend the following:	
mending name, enter the new name of the limited liabili	ty company here:
pierce tome Luxury LLC name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbreviation "L.L.C."
	1470 NW 2nd Terrace
new principal offices address, if applicable:	Pomicano Beach FL 33060
pal office address MUST BE A STREET ADDRESS)	TOTALITO DESCRIPE COOP
new mailing address, if applicable: 1g address MAY BE A POST OFFICE BOX) mending the registered agent and/or registered office ad and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	2436 N Federal HW Light House Point, FL 33064 #465 dress on our records, enter the name of the new registered
	, Florida
	City Zip Code
egistered Agent's Signature, if changing Registered Agent:	to the same size I fouth an armost a same breaith the
by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete p the obligations of my position as registered agent as pr filed to merely reflect a change in the registered office a my has been notified in writing of this change.	ovided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

<u>ved from our records:</u>

Manager - Authorized Member

<u>Name</u>	Address	Type of Action
		□Remove
		□ Change
		□Remove
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