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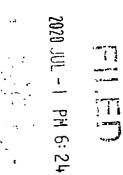
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AUG 1 4 2020 S. YOUNG

## COVER LETTER

Registration Section

TO:

Division of C	orporations				
	ES OF ROYALTY LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles (	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	TILYARN I BOYKIN				
	Name of Person				
	ESSENCE'S OF ROYALT	TY LLC			
		Firm/Company			
	9645 BAYMEADOWS RI	) #767			
		Address			
	JACKSONVILLE, FL 322	256			
	City/State and Zip Code				
	TILYARNBOYKIN@GM. E-mail address: (	AIL.COM to be used for future annual report noti	ification)		
For further information	n concerning this matter, please c	all:			
TILYARN J BOYKIN	ĸ	904 703-5648			
Nam	e of Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check fo	r 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)		
P.O. Box 6	n Section Corporations	Street Address: Registration Se Division of Co The Centre of 7 2415 N. Monro	rporations		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## ESSENCE'S OF ROYALTY LLC

company has been notified in writing of this change.

( <u>Name of the Limited Liability Company as</u> (A Florida Limited Liabili	<u>it now appears on our re</u> (v. Company)	ecords.)	3
TAT ATAM DIMES DISCO	iy e vinipaniy y		
The Articles of Organization for this Limited Liability Company were	filed on <u>06/20/2020</u>		nd assigned.
Florida document number 1.20000172723		• .	
			PH
This amendment is submitted to amend the following:			6:51
A. If amending name, enter the new name of the limited liability	company here:	ţ	24
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation	"LLC" or the abbreviat	ion "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		<u>-</u>	<u></u>
Enter new mailing address, if applicable:			
· ·			
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or registered office addr	ess on our records, <u>e</u>	nter the name of t	he new registered
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
		121	
	City	Florida <u></u> Zij	o Code
New Registered Agent's Signature, if changing Registered Agent:	•		
			والمراجع المراجع
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete perj	-act in this capacity. Someone of my dutic	. I further agree to es-and l am famili	i comply with the far with and
provisions of all statutes relative to the proper and complete perf accept the obligations of my position as registered agent as prov	ided for in Chapter (	605, F.S. Or, if thi	s document is
being filed to merely reflect a change in the registered office add	ress, I hereby confir	m that the limited	liability

If 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>	<u>Address</u>	Type of Action
MGR	SELAMA WIT GEBREGZIABHEI	9645 BAYMEADOWS RD #767	□Add
<del></del>		JACKSONVILLE, FL 32256	■Remove
MGR	TILYARN J BOYKIN	9645 BAYMEADOWS RD #767	
<del></del>		JACKSONVILLE, FL 32256	□Remove
			□ Change
<del>-</del>			
			□Remove
			□Change
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			□Remove
		<del></del>	□ Change
			□Add
			□Remove
			□Change

	<del></del>
If an e <u>Note:</u>	tive date, if other than the date of filing:
e reco rd is t	ord 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 filed.
Dated	<u>CODE</u> .
	Signature of a member or authorized representative of a member