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| (Requestor's Name) | - |
|---|------|
| (Address) | |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT | MAIL |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | i |
| Special Instructions to Filing Officer: | , |
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TO:

Registration Section

| Division of Cor | porations | | ÷ |
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| | BALLE BOUTIONS | | |
| SUBJECT: HW | VDMARIE BOUTIQUE LL Name of Lim | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | MARIE B. AN | DERSON | |
| | | Name of Person | |
| | HWDMARIE | BOUTIQUE LLC | |
| | | Firm/Company | |
| | 1101 NE 3RD | AVENUE, APT 8 Address | |
| | | | |
| | POMPANO BEACH | FL 33060 City/State and Zip Code | |
| | HWDMARIE@GM | AIL.COM | |
| | | to be used for future annual report noti | fication) |
| For further information c | concerning this matter, please ca | all: | |
| MARIE B. ANDE | | at (<u>954</u>) <u>553-4122</u> | |
| Name o | of Person | Area Code Daytim | e Telephone Number |
| Enclosed is a check for the | he 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 Addres | | Street Address: | |
| Registration by Division of C | | Registration Se Division of Cor | |
| P.O. Box 632 | - | The Centre of T | - |
| Tallahassee. | FL 32314 | 2415 N. Monro Tallahassee, FL | e Street, Suite 810 . 32303 |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2020:11 17 PH 6: 20

HWDMARIE BOUTIQUE LLC

(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 Lia | ability Company were fi | iled on | and assigned |
|--|---|---|---|
| Florida document number L20000209578 | · | | |
| This amendment is submitted to amend the follow | wing: | | |
| A. If amending name, enter the new name of | the limited liability co | mpany here: | |
| The new name must be distinguishable and contain the wo | ords "Limited Liability Com | pany," the designation "LLC" | or the abbreviation "L.L.C." |
| Enter new principal offices address, if applica | ible: | | |
| (Principal office address MUST BE A STREET | TADDRESS) | | |
| | | | |
| (Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/or re agent and/or the new registered office address Name of New Registered Agent: | gistered office address | | he name of the new registered |
| New Registered Office Address: | | | |
| | | Enter Florida street address | |
| | Cin | , Flor | rida |
| New Registered Agent's Signature, if changing Ro | • | • | zip Code |
| I hereby accept the appointment as registered provisions of all statutes relative to the properacept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this e | I agent and agree to a or and complete perfor tered agent as provide egistered office addres | mance of my duties, and ed for in Chapter 605, F | l I am familiar with and .S. Or, if this document is |

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> | Address | Type of Action |
|--------------|----------------|---|----------------|
| Manager | Marie Anderson | 1101 NE 3rd Avenue Apartment 8 Pompano Beach FI 33060 | X IAdd |
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| an effective <u>ote:</u> If the | ate, if other the date is listed, the date inserted in effective date o | date must be spec n this block doc | cific and can as not meet | the applical | date of filing ble statutory | or more than S filing require | (option 0 days after f ments, this | iling.) Pursuant | to 605.020 be listed as |
| record spe- is filed. | cifies a delayed | effective date, | but not an e | effective tin | ie, at 12:01 a | .m. on the ea | rlier of: (b) | The 90th da | y after the |
| ited 0 8 | 3/10/2020 | | _ _ · _ | | _• | | | | |
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Filing Fee: \$25.00