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PICK-UP	WAIT	MAIL
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Special Instructions to	Filing Officer:	
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TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

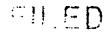
Division of Corporations			
SUBJECT:	BLOOM &)	BLING- LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	MARI	KUMMALA Name of Person	
		Name of Person	
	BLOOM	1 2 BIING II	
	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	1 & BLING LL Firm/Company	` <u>C.</u>
	/272 B	AV /E010 / N'	
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	BKADEN	10N FL 34203	<u> </u>
	marikum	City/state and Zip Code	00
	E-mail address: (TON FL 34203 City/State and Zip Code nala (a) yahoo, Con to be used for future annual report notificati	on)
For further information co	oncerning this matter, please c	all:	
		00- 11717	000
Name of	Person	at (<u>305)</u> 4317 Area Code Daytime Tel	enhane Number
· · · · · · · · · · · · · · · · · · ·		med code Dayanie ter	ephone runivel
Enclosed is a check for th	a following amount:		
	C	There are the same and	E 040 00 EW P
SS \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address</u> Registration S		<u>Street Address:</u> Registration Section	n
Division of Co		Division of Corpora	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Rloom & Rang	h hC	ో গু মূল 24	PM 12: 59
(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears on our ty Company)	records	· . :
The Articles of Organization for this Limited Liability Company wer	e filed on $\frac{7}{2}$	720	_ and assigned
Florida document number <u>L200002222653</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	company here:		
The new name must be distinguishable and contain the words "Limited Liability C	ompany," the designation	n "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
_			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		.,	
B. If amending the registered agent and/or registered office addragent and/or the new registered office address here:	ess on our records,	enter the name o	f the new registere
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street	address	
		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
A. B. H.C.R.	SAGA OINONEN-WILLIAM	SARASOTA, FL 34243	□Add
/			& Remove
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	***************************************		□ Add
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			Change

D. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
<u></u>	
(If an effective Note: If t	date, if other than the date of filing:
f the record specord is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	BRADENTON FL 8/20/20
	Min Ihual
	Signature of a member or authorized representative of a member
	MARI KUMMALA
	MARI KUMAL-A Typed or printed name of signee