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## **COVER LETTER**

SHR IFC'T:		OLIVA LLC				
Soloner.		Name of Limite	ed Liability Company	<del></del>		
			•			
The enclosed	Articles of A	amendment and fee(s) are subm	itted for filing.			
Please return	all correspon	dence concerning this matter to	the following:			
		Cheyenne Moseley				
Name of Person						
Name of Person  Legalzoom.com, Inc.  Firm/Company  101 N Brand Blvd 11th Fl  Address  Glendale, CA 91203  City/State and Zip Code karina.etchison@gmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Cheyenne Moseley  Name of Person  Area Code  Daytime Telephone Number  Enclosed is a check for the following amount:  S25.00 Filing Fee  Certificate of Status  Certified Copy  (additional copy is enclosed)  Certificate of St						
		101 N Brand Blvd 11th Fl				
			Address			
		Glendale, CA 91203				
	Name of Limited Liability Company  assed Articles of Amendment and fee(s) are submitted for filing.  turn all correspondence concerning this matter to the following:  Cheyenne Moseley  Name of Person  Legalzoom.com, Inc.  Firm/Company  101 N Brand Blvd 11th Fl  Address  Glendale, CA 91203  City/State and Zip Code  karina.etchison@gmail.com  E-mail address: (to be used for future annual report notification)  er information concerning this matter, please call:  e Moseley  Name of Person  Area Code  Daytime Telephone Num  is a check for the following amount:  10 Filing Fee  S \$30.00 Filing Fee \$ \$55.00 Filing Fee & \$ \$60.00 Certificate of Status  Certificate Copy Certificate Copy (additional copy is enclosed)					
		E-mail address: (to	be used for future annual report no	otification)		
For further in	nformation co	ncerning this matter, please call	l:			
Cheyenne M	loseley					
	Name of	Person		me Telephone Number		
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□ \$25.00 F	inng ree		Certified Copy	Certificate of Status &		

MAILING ADDRESS:

Registration Section
Division of Corporations

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CHLOE ET OLIVA LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on 08/13/2020	and assigned
Florida document number L20000247107		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
Chloe et Olivia LLC		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	207
		~ <del>-</del> ~1
	-	
nter new mailing address, if applicable:		. 0
Mailing address MAY BE A POST OFFICE BOX)		
		<del></del>
<ol> <li>If amending the registered agent and/or registered egistered agent and/or the new registered office address h</li> </ol>	office address on our records, <u>ente</u> ere:	r the name of the no
	<del></del>	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
<del></del>	City	Zin 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 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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Type of Action    Add
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ctive date, if other than the date of filing:	(optional)	
effective date is listed, the date must be specific and cannot be prior to dat	e of filing or more than 90 days after filing.) Pursuant to 6	505.0
If the date inserted in this block does not meet the applicable siment's effective date on the Department of State's records.	tatutory filing requirements, this date will not be li	isted
ecord specifies a delayed effective date, but not an	effective time, at 12:01 a.m. on the ear	rlier
ne 90th day after the record is filed.		
d October 29th, 2020.		
0 October 29, 2020.		
Lain-	Eldin	
	representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00