

W20000249711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

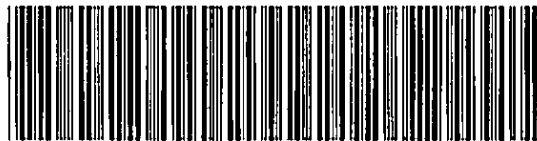
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
2022 SEP 29 AM 8:55

J. DENNIS

DEC 22 2022



Leah D. Leipold  
Associate

Direct: 470.481.4218  
leah@caiolarose.com

September 28, 2022

**VIA FEDERAL EXPRESS**  
**TRACKING NO.: 7700 6023 0433**

Florida Division of Corporations  
The Centre of Tallahassee  
2145 N. Monroe Street, Suite 810  
Tallahassee, FL 32303  
Attn: Registration Section

**Re: Articles of Amendment to Articles of Organization of Simple Boheme LLC;  
Florida Document No: L20000249711**

Dear Sir or Madam:

Enclosed please find an executed copy of the Articles of Amendment to Articles of Organization for Simple Boheme LLC. Also included is a check for \$25.00 to cover the relevant filing fees.

Please contact me at 470-481-4218 or leah@caiolarose.com if you have any questions or comments regarding the application.

Sincerely,

Leah D. Leipold

Enclosures

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Simple Boheme LLC  
\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Leah Leipold  
\_\_\_\_\_  
Name of Person

Caiola & Rose LLC  
\_\_\_\_\_  
Firm/Company

125 Clairemont Avenue, Suite 240  
\_\_\_\_\_  
Address

Decatur, GA 30030  
\_\_\_\_\_  
City/State and Zip Code

ali@urthyscents.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Allison Christine East  
\_\_\_\_\_  
Name of Person

813 7700314  
at (\_\_\_\_\_) \_\_\_\_\_  
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Simple Boheme 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 Liability Company were filed on August 14, 2020 and assigned  
Florida document number L20000249711.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Urthy Scents, LLC

The new name must be distinguishable and contain the words "Limited Liability 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)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

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 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>	<u>Type of Action</u>
AMBR	Jennifer Rotondo	185 N. Mill Rd	<input checked="" type="checkbox"/> Add
		Atlanta, GA 30328	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mike Rotondo	185 N. Mill Rd.	<input checked="" type="checkbox"/> Add
		Atlanta, GA 30328	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change


[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Dated September 28, 2022

  
Signature of a member or authorized representative of a member

Anthony Binford Minter, Attorney for Manager and Member Allison East

Typed or printed name of signee