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(ке	questor's Name)	
(Ād	dress)	
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PICK-UP	■ WAIT	MAIL
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(Bu	isiness Entity Nami	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
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COVER LETTER

SURJECT: Zuly	m Boyfique	LLC.	**
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
		_	
	Zhanna	Kaybakova Name of Person	
		Name of Person	
	Zulum	Boutique LL Firm/Company	C
		Firm/Company	
	2000 Presid	dential Way 1	Apr. 1206
		Address /	
	West Palm 1	Beach/FL 3 City/State and Zip Code	3401
		City/State and Zip Code CO YOLOO, COM to be used for future annual report not	
	imursook	a@yahoo, eom	
	E-mail address: (to be used for future annual report not	ification)
For further information c	concerning this matter, please ca		
Zhanna Ł	aybatova	at (<u>240)</u> 460 - Area Code Daytin	-5927
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	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)

TO:

Registration Section **Division of Corporations**

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 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Zulum Boutique L	LC	
Zulum Boutique L (Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our nited Liability Company)	records.)
The Articles of Organization for this Limited Liability Com Florida document number <u>L20000292501</u> .	pany were filed on09 / /	I/2020 and assigned
his amendment is submitted to amend the following:		
N. If amending name, enter the new name of the limited		
TAMAI athletics 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 ADDRES	(S)	
	 -	
Enter new mailing address, if applicable:		<u>; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; </u>
Mailing address MAY BE A POST OFFICE BOX)		_ ;
		<u>:</u>
3. If amending the registered agent and/or registered of	fice address on our records,	enter the name of the new registe
gent and/or the new registered office address here:		 •
N. C. D. C. L.		<u> </u>
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	F . F9	
	Enter Florida street	address
	Cin	_, FloridaZip Code
	Cuỳ.	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
			□∧dd
			□Remove
			□Change
			□Add
			□Remove
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ote: If the	and is instead the dute in	block does not m	eet the applicable	are or ming or more u	(optional an 90 days after filin uirements, this dat) g.) Pursuant to 605.0207 e will not be listed as t
ecord spec is filed.	ifies a delayed effec	tive date, but not	an effective time,	at 12:01 a.m. on th	e earlier of: (b) T	he 90th day after the
ted <u>3/</u>	22/21		2021.			
		HO				
		Al				

Typed or printed name of signee