# 120000298724

(Requestor's Name)				
(itequestors rearrie)				
(Address)				
(Address)				
(				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
$\varphi$				
(During Still Name)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
	_			
Special Instructions to Filing Officer:				

Office Use Only



900358684069

**9007358684069** 03/18/21--01023--002 \*\*25.00

21 MAR 18 AMD: 28

FILED
2021 MAR 18 AM 9: 35
SECRETARY OF STATE

## **COVER LETTER**

I'O: * Registration Section Division of Corporations			1 King Comment
SUBJECT: <u>B</u>	ach Love 30 Name of Limit	ed Linbility Company	· ,
The enclosed Articles of a	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspor	ndence concerning this matter t	o the following:	
	Tammy	Name of Person	
		Firm/Company	
	117 Prais	Address	
	Sonta lo	City/State and Zip Code	BURG
	tammy ha	o be used for filture annual report notif	1 Teation)
For further information co	oncerning this matter, please ca	dl:	
19mmy	Henel	at ( O ) Daytime	C - 8TU - Proposition of the Company
Enclosed is a check for the	ne 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 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

State of A 2021 HAR 18 CAM 9:35 COVE 301
(Name of the Limited Liability Company as it now appears on our records) STALL AHASSEE, FL.
The Articles of Organization for this Limited Liability Company were filed on <u>C9 \\8\20</u> and assigned Florida document number <u>L 2000 29 17 24</u>
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:  ESTUAY State of Mind 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 Type of Action Address Title <u>Name</u> atwood for at Longed Amada Edwards Beach □ Change Kristen Lowell Pairie Pau Remove ☐ Change  $\square$ Add □Remove □ Change □Add □Remove \_ □Change \_ 🗀 Add □Remove □Change  $\square$ Add □Remove □ Change

Typed or printed name of signee