L2,000305539

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
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COVER LETTER

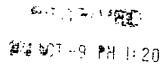
TO: Registration Sec Division of Corp			
SUBJECT: The	BUNDIC T	BOYF QUE L ed Liability Company	<u>LC</u>
The enclosed Articles of A	mendment and fec(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
	Adrianna	Bunion Name of Person	
	4434 GEGT	hart of follow	303
	Tallahasse F Adrianna Denis E-mail address: (to	City/State and Zip Code e 17 D Cyma, L. Com be used for future annual report notif	nication)
For further information co	ncerning this matter, please ca	11:	
Adricana T	Person Person	at (250) 363 -4 Area Code Daytime	4029 e Telephone Number
Enclosed is a check for the	e 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





FLORIDA DEPARTMENT OF STATE Division of Corporations

October 9, 2020

ADRIANNA BUNION 4434 GEARHART ROAD APT 5303 TALLAHASSEE, FL 32303

SUBJECT: THE BUNDLE BOUTIQUE LLC

Ref. Number: L20000305539

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please list the complete address for the AMBR and list the person that you are removing.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 620A00019754

Claretha Golden Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

imited 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 Florida document number L76000305539 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 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

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>	Name	Address	Type of Action
AMBR	Adriana Bunion	4434 Bearhart Td	D Add
	Tallahasse FL, 303	∑ □Remove	
			🗆 Add
		<u> </u>	
			□Change
			□Add
			Remove
			□ Change
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	*****	□Remove	
		[] Change	
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			□ Remove
			ClChanga

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 ecord is filed.
Dated 10 10 2000
Signature of a member or authorized representative of a member
Typed or printed name of signee