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## **COVER LETTER**

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SHDIECT	Daisy's Car Γ:	ndles LLC			
SOBJECT	·	Name of Lin	nited Liability Company		<del></del>
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please retu	ırn all correspo	ondence concerning this matter	to the following:		
		Daisha Burney			
			Name of Person		<del></del>
		Daisy's Candles LLC			
			Firm/Company		
		1630 balkin rd lot 112			
			Address	- <del></del>	
		Tallahassee, FI 32305			
			City/State and Zip Coc	de	<del></del>
		daishamb2014@gmail.com			
		E-mail address; (	to be used for future annu	ial report notification	on)
For further	information c	oncerning this matter, please c	all:		
Daisha Bu	irney		850 ( at ()	6942390	
	Name o	f Person	Area Code	Daytime Tel	cphone Number
Enclosed is	s a check for th	ne following amount:			
\$25.00	) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fe Certified Copy (additional copy is c		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Iailing Addres			Address:	
Registration Section Division of Corporations			Registration Section Division of Corporations		
P	.O. Box 632	7		Centre of Talla	
T	allahassee, l	FL 32314	2415	N. Monroe Str	reet, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Daisy's Candles 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  $\frac{10}{13}$ and assigne Florida document number  $\_^{L20000323377}$ 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 "LLC," 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 regis agent and/or the new registered office address here: Daisha Burney Name of New Registered Agent: 1630 balkin rd. Lot 112 New Registered Office Address: Enter Florida street address Tallahassee

## 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 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person\_bei or removed from our records:

MGR = Manager AMBR = Authorized Member

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