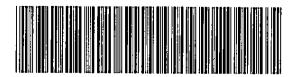
## L20000336268

(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	<u></u>
		5/20/21 Th

Office Use Only



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21 KLS 31 PH I2: 16

## **COVER LETTER**

Registration Section

TO:

Divis	ion of Co	rporations		
		LUSH LLC		
SUBJECT: _		Name of Lin	nited Liability Company	
The enclosed A	Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return a	all correspo	ondence concerning this matter	to the following:	
		BIEN AIME, MANOUCH	IEKA	
			Name of Person	
		n/a		
			Firm/Company	<u> </u>
		7555 Cedar Hurst Ct.		
			Address	
		Lake Worth Ft.33467		
			City/State and Zip Code	
		eridinaha@gmail.com		
		E-mail address: (	to be used for future annual report no	tification)
For further info	ormation c	oncerning this matter, please c	all:	
BIEN AIME,	MANOUC	CHEKA	443 497-9652	
	Name o	f Person	Area Code Daytii	me Telephone Number
	haale Carrel	e California		
		ne following amount:	_	
□ \$25,00 Fil	ing 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)
Mailie	ng Addres	s:	Street Address:	
Regi	stration S	Section	Registration Se	
	sion of C Box 632	orporations	Division of Co	
		7 FL 32314	The Centre of 2415 N. Monro	l allahassee De Street, Suite 810

Tallahassee, FL 32303

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

AND TAKE OF A MADE

**ROYAL LUSH LLC** 

21 MAR 31 PN 12: 16

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

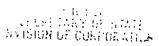
The Articles of Organization for this Limited	Liability Comp	any were filed on	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited	liability company here:	
n/a			
The new name must be distinguishable and contain the	words "Limited L	iability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	n/a	
(Principal office address MUST BE A STRE.		<u> </u>	.,
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office addreses.	registered offi	n/a ice address on our records, <u>enter the</u>	
Name of New Registered Agent:	n/a		
New Registered Office Address:	n/a		
<del>-</del>		Enter Florida street address	
	<del> </del>	, Florid	
		City	Zip Code

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>	Address 21 HAR 31 PH 12: 16	Type of Action
MGR	Eridina Jean Jacques	7555 Cedar Hurst Ct. Lake Worth Fl.33467	🗆 Add
			□Remove
			Change
MGR	Manoucheka Bien-Aime	7555 Cedar Hurst Ct. Lake Worth Fl.33467	□ Add
			□Remove
			<b>■</b> Change
Ceo	Joana Danastor	7555 Cedar Hurst Ct. Lake Worth F1.33467	□Add
			= Remove
			Change
Ceo	GOODWINE, NATACHA	7555 Cedar Hurst Ct. Lake Worth Fl.33467	🗀 <b>A</b> dd
			Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

	21 HAR 31 PM 12: 16
rective date, if other than the date of filing:  In effective date is listed, the date must be specific and cannot be prior to date of filing or more than the date inserted in this block does not meet the applicable statutory filing require current's effective date on the Department of State's records.	(optional) 90 days after filing.) Pursuant to 605.0 ements, this date will not be listed
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the estimates stilled.	arlier of: (b) The 90th day after t
$\frac{3}{29}$	
110	
Signature of a member or authorized representative of a mer	nber
Manouchka Sien - Aime Typed or printed name of signee	