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12/29/20

## **COVER LETTER**

	egistration Selivision of Cor							
SUBJECT		enthal, LLC						
SUDJECI		Name of Lin	nited Liability Company					
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:					
		Hallic Rosenthal						
			Name of Person					
		Hallie Rosenthal, LLC						
			Firm/Company					
		260 Everglade Avenue						
			Address	ddress and Zip Code				
		Palm Beach, FL 33480						
			City/State and Zip Code					
		hallie@halliesays.com						
		E-mail address: (	to be used for future annual report no	tification)				
For further	information c	concerning this matter, please c	all:					
Hallie Ros	enthal		248 797-2469					
	Name o	f Person		me Telephone Number				
Enclosed is	a check for th	ne following amount:						
<b>⊠</b> \$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)				
	ailing Addres		Street Address:	autio-				
Registration Section Division of Corporations		Registration Section Division of Corporations						
Р.	O. Box 632	.7	The Centre of					
T	allahassee, I	FL 32314	2415 N. Monro	oe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hallie Rosenthal, LLC	
( <u>Name of the Limited Liability Company as i</u> (A Florida Limited Liabilit	it now appears on our records.) y Company)
The Articles of Organization for this Limited Liability Company were	filed on 10/27/20 and assigned
lorida document number L20000341444	-
his amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liability c	company here:
he new name must be distinguishable and contain the words "Limited Liability Con	With decimal with CV and a abbreviation Of L CV
	mpany, the designation LLC of the aboreviation L.L.C.
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	- 10 NC
	F1L
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	=
. If amending the registered agent and/or registered office addre gent and/or the new registered office address here:  Name of New Registered Agent:	ess on our records, enter the name of the new regis
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.

Cinv

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Hallie Rosenthal	260 Everglade Avenue, Palm Beach, FL 33480	DAdd
			□Remove
AAADD	Dul 4 LT		□Change
AMBR	Beth-Anne Lipin	260 Everglade Avenue, Palm Beach, FL 33480	🖸 Add
			□Remove 20:
			2020 #OV 23 PH
		<u> </u>	Remove
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ective date, if other than the date of filing:	ant to 605.02 ot be listed
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th of the filed.	day after the
ed November 17. 2020	