## L20000342742

(Re	questor's Name)	
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nai	me)
(Do	cument Number)	)
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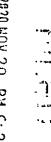


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## **COVER LETTER**

	egistration Se ivision of Cor			
CHD IE CT	Lulolina LI	LC		
SUBJECT	:	Name of Lim	Name of Limited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	m all correspo	ondence concerning this matter	to the following:	
		Lina Giraldo		
			Name of Person	
		Lulolina LLC		
			Firm/Company	
		465 Brickell Ave #3706		
			Address	
		Miami, FL 33131		
			City/State and Zip Code	
		linagiraldo@utexas.edu		
		E-mail address: (	to be used for future annual report no	trication)
For further	information c	oncerning this matter, please c	all:	
Lina Girale	do		312 805-7595	
	Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is	a check for th	he 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)
	ailing Addres		Street Address: Registration Se	ection
Registration Section Division of Corporations		Division of Corporations		
	O. Box 632		The Centre of	
Fi	allahassee, l	rl 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lulolina LLC			2020
(Name of the Lim	ited Liability Cor (A Florida Limit	npany as it now appears on our record ed Liability Company)	<u>h.)</u>
The Articles of Organization for this Limited L Florida document number L20000342742	Liability Compa	any were filed on 40/28/2020	2020 MOV 20 and assigned 5.37
This amendment is submitted to amend the fol	lowing:		$\omega$
A. If amending name, enter the new name of	of the limited li	iability company here:	
N/A - Lulolina LLC is already listed			
The new name must be distinguishable and contain the	words "Limited Li	ability 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 STREE	ET <u>ADDRESS,</u>		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	BOX)		_ <del></del>
B. If amending the registered agent and/or agent and/or the new registered office addre		ce address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		Enter Florida street addres	4.3
			orida
	-	City	Zip Code

## 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 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	Type of Action
AMBR	Lina Giraldo	465 Brickell Ave #3706, Miami, FL 33131	<b>=</b> Add
			🗆 Remove
			□Change
		<del> </del>	□Add
			□Remove
			□Change
			🗆 Add
			Remove
			□ Change
			🗀 Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>
E. Effective date, if other than the date of filing:  (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.
If 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 record is filed.
Dated November 17  Signature of a member or authorized representative of a member
Lina Giraldo

Filing Fee: \$25.00

Typed or printed name of signee