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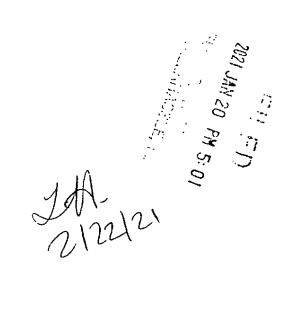
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COVER LETTER

TO:

Registration Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

		ESSENTIALS, LLC				
SUBJECT:	<u></u>	Name of Lim	ted Liability Company			
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	idence concerning this matter	to the following:			
		Sherrin Bernstein				
		44.14. Mall	Name of Person			
			Firm/Company			
		1405 Normandy Dr				
			Address			
		Miami Beach, FL 33141				
		City/State and Zip Code sherrin@attractessentials.com				
		E-mail address: (to be used for future annual re	eport notification)		
		ncerning this matter, please ca				
SHERRIN B	ERNSTEIN			-6539		
	Name of	Person	at () Area Code	Daytime Teleph	ione Number	
Enclosed is a	check for the	e following amount:				
□ \$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)		i \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	ling Address		Street Ad			
	gistration S vision of Co	ection orporations		tion Section of Corporati	ons	

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

ATTRACT ESSENTIALS, LLC

(A Florida Limi	ted Liability Company)	
The Articles of Organization for this Limited Liability Comp. Florida document number $\frac{1.20000344005}{1.20000344005}$.	any were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here	2:
The new name must be distinguishable and contain the words "Limited L	iability Company," the des	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	2	
		2021 JAN
Enter new mailing address, if applicable:		2
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
		<u> 0</u>
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ice address on our rec	ords, <u>enter the name of the new registerec</u>
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		
	Enter Florid	a street address
		Florida
	Cĩ _Ŋ .	Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complacept the obligations of my position as registered agent being filed to merely reflect a change in the registered off company has been notified in writing of this change.	lete performance of m as provided for in Ch	y duties, and I am familiar with and apter 605. F.S. Or, if this document is

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	Sherrin Bernstein	1405 Normandy Dr	
			□Add
		Miami Beach, FL 33141	□Remove
			≡ Change
MGR	Rodd Marcus	346A Greenwich St	□Add
	·	New York, NY 10013	
			□Remove
			■ Change
			
			□Remove
			Change
			□Add
			□ Remove
			□Change
			□ Add
			Remove
			☐ Change
			□Add
			□Remove
			□ Change

on the Annual Report issued on	Jan 04, 2021
Specifically, Sherrin Bernstein show	uld be listed as AMBR and Rodd Marcus should be listed as MGR.
	
,	
	
	
 	
	
	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 k does not meet the applicable statutory filing requirements, this date will not be listed a
record specifies a delayed effective d d is filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
January 13	2021
Dated	,
(7,44)	Quanto VOIA
$\sim \Lambda I \Lambda \Lambda_{-}$	ignature of a member or authorized representative of a member