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COVER LETTER

10: Registration Section Division of Corporations
SUBJECT: Line of Loxory Gredit Repair and Tax Services LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
LAtoria WARE BON Name of Person
Firm/Company
3900 Contral Ave Apt 310
Fort myers fl 33901 City/State and Zip Code
Line of luxury lic ad amail. Com E-mail address: (to be used for filtere annual report notification)
For further information concerning this matter, please call:
CA+OCA WARE BOO at (2391) 895-7428 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status &

Mailing Address:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: 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

The Articles of Organization for this Limited Liability Company were filed on November 16, 2020 and assigned Florida document number <u>120006 361570</u>. 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

Cirv

11 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
Ceo	Jatoria WARE	3900 Central Ave Apt 310 for myers fl 33901	(BAdd
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AMBR	CAtor, A WARE BON	3900 Central Ave Apt 310 fort myers fl 33901	GAdd
			□Remove
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cord specifies a delayed effective date, s filed.	but not an effe	ective time, at 12	2:01 a.m. on the ear	dier of: (b) Th	ne 90th day after th
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