# 120000367056

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number	)
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## Sunshine State Corporate Compliance Company

### 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 2/19/202	1	##11/A1 V 1	lay -
PAINTINE ALABAM	WITH GRATITUDE, L	<i>₩WALK I</i> N	مصا
ENITTY NAME_			
DOCUMENT NU	MBER L20000367056		-
	**PLEASE FILE	THE ATTACHED AND RETURN**	
xxxx	Plain Copy		
	Certified Copy		
	Certificate of Stat	tus	
	**PLEASE OBTAIN TH	'E FOLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of s	Arts & Amendments	
	Certificate of Good	'Standing	
	**APOSTILLE"	/ NOTARIAL CERTIFICATION**	
COUNTRY OF DE	STINATION		
NUMBER OF CER	PTIFICATES REQUESTED_		
TOTAL OWED\$	25.00	ACCOUNT #: I20160000072	
		S R FM	
Please call Tin	a at the above number f	for any issues or concerns. Thank you so much!	:

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

with Gratitude LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liab	ility Company were filed on 01/11/2021	and assigned
Florida document number L20000367056	·	
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable	le:	
Principal office address MUST BE A STREET A	ADDRESS)	
		~1.
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO	<u> </u>	<u></u>
		., 6
R . 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 offic		FEET 53
		一点。
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
-	, Florida	Zin Code
	City	Lin 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>	<u>Address</u>	Type of Action
AMBR	Miranda Colette Massey	226 7th Ave N	□ Add
		#6	
			Remove
		St. Petersburg, FL 33701	Change
		<del> </del>	□ Add
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ffective date, if other than the o	late of filing:		(optional)	
an effective date is fisted, the date must sote: If the date inserted in this bloocument's effective date on the Department.	be specific and cannot be prior to ck does not meet the applica	o date of filing or more than ble statutory filing require	90 days after filing.) Pursuant to 60	05.0207 (3 sted as the
e record specifies a delayed The 90th day after the reco		an effective time, a	t 12:01 a.m. on the earl	lier of:
February 18th	. 2021	_ ·		
	/s/ Miranda Colette	Massey		
	, , , , , , , , , , , , , , , , , , , ,			

D.

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00