

7/28/22, 3:27 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L20000394981

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : POPPI ENTERPRISES & TECHNOLOGY LLC
Account Number : 120210000079
Phone : (754)215-9616
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TALLAHASSEE, FL

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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LEHMAC LLC**

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C. BRUMBLEY
SEP 30 2022

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

LEHMAC LLC

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

The Articles of Organization for this Limited Liability Company were filed on 12/17/2020 and assigned Florida document number L20000394981.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

IT'S BY MARIA CLARA LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

City, Florida 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

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 TALLAHASSEE, FL

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>	<u>Type of Action</u>
AMBR	VALESCA M NANTES	18957 CLOUD LAKE CIRCLE	<input type="checkbox"/> Add
		BOCA RATON, FL 33496	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ULYSSES GONCALVES	18957 CLOUD LAKE CIRCLE	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33496	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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