L21000008553

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Sunshine State Corporate Compliance Company

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

DOCUMENT NUMBER L21000008553 **PLEASE FILE THE ATTACHED AND RETURN** XXXXX Plan Copy Certified Copy Certificate of Status **PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY** Certified Copy of Arts & Amendments Certificate of Good Standing **APOSTILLE' / NOTARIAL CERTIFICATION** COUNTRY OF DESTINATION_ NUMBER OF CERTIFICATES REQUESTED_	DATE 05/07/2021	_			******
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PLEASE FILE THE ATTACHED AND RETURN XXXXX Plain Copy Certificate of Status **PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY** Certified Copy of Arts & Amendments Certificate of Good Standing **APOSTILLE' / NOTARHAL CERTIFICATION** COUNTRY OF DESTINATION NUMBER OF CERTIFICATES REQUESTED NUMBER OF CERTIFICATES REQUESTED FOTAL OWED \$25.00 ACCOUNT #: 120160000072	ENTITY NAME_SOFT	CREATIONS, LLC			
PLEASE FILE THE ATTACHED AND RETURN XXXXX Plain Copy Certificate of Status **PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY** Certified Copy of Arts & Amendments Certificate of Good Standing **APOSTILLE' / NOTARHAL CERTIFICATION** COUNTRY OF DESTINATION NUMBER OF CERTIFICATES REQUESTED NUMBER OF CERTIFICATES REQUESTED FOTAL OWED \$25.00 ACCOUNT #: 120160000072					NHW-2
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Please call Tina at the above number for any issues or concerns. Thank you so much!	Please call Tina at ti	he above number kor anu is	SUES OF CONCERNS	Thank was en	ruch!

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF 3571 MAN

OF 2021 MAY -7 AM 8: 40

Soft Creations LLC	™ y ‴	
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Company were filed on 12/30/2020	and assigned
Torida document number L21000008553	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
Avec Vanille LLC		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
		Tal live
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registere igent and/or the new registered office address here;	ed office address on our records, enter the n	ame of the new registe
Name of New Registered Agent:		
New Registered Office Address:		· ·
	Enter Florida street address	
	, Florida	
	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> Name Type of Action ____ □Remove 3 ch persen ledeg addi-☐Change _ 🗆 Add _______□Remove 2003 Remove _____ □Change _ □Add ____ □Remove _____ □Change ___ DAdd A 166 Oc _ □Remove _ Change

amending any other information, enter change(s) here: (41 (181) -	7 Ali e	3: Ln	
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/s/ Jayna Faton	statutory filing at 12:01 a.m. or	e than 90 day requiremen the earlier	es after filin ts. this dat of: (b) T	ig.) Pursuant t te will not be	: listed a
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Filing Fee: \$25.00

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