

121000013422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

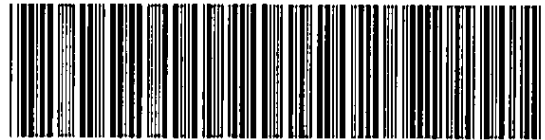
(Business Entity Name)

(Document Number)

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COVER LETTER

*Name change/
address change*

TO: Registration Section
Division of Corporations

SUBJECT: (A WORLD OF CULTURE, LLC /NAME CHANGE/ADDRESS CHANGE TO " THE HE/
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:

SHELLEY PADRON

Name of Person

THE HEART OF CULTURE, LLC.

Firm/Company

14359 MIRAMAR PKWY #430

Address

MIRAMAR, FL. 33027

City/State and Zip Code

shelleypadron@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shelley Padron

305 510-1222
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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
2115 N. Monroe St., Tallahassee, FL 32304

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

A WOLD OF CULTURE, 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 1/4/2021 and assigned
Florida document number L21000013422.

This amendment is submitted to amend the following:

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

THE HEART OF CULTURE, 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:

14359 MIRAMAR PKWY SUITE #430

(Principal office address MUST BE A STREET ADDRESS)

MIRAMAR, FL. 33187

Enter new mailing address, if applicable:

14359 MIRAMAR PKWY SUITE #430

(Mailing address MAY BE A POST OFFICE BOX)

MIRAMAR, FL. 33187

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

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.

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated JULY 2

2021

Melley P
a member or authorized representative of a member

Signature of a member or authorized representative of a member

SHELLEY PAIDRON

Typed or printed name of signee