## K21000026573

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	<del>&gt;</del> #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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## **COVER LETTER**

TO:

	Registration Se Division of Cor				
011D 100	Lucy & Co	LLC			
SUBJEC	:T:	Name of Lim	ited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	indence concerning this matter	to the following:		
		Caren Mahy			
			Name of Person		
		Lucy & Co			
			Firm/Company	<del></del>	
		3721 SW 88th Place Unit a	A		
			Address		
		Miami FL 33165			
			City/State and Zip Code	·	
		caren1127@gmail.com			
-			to be used for future annual rep	ort notification)	
For furth	er information c	oncerning this matter, please c	aii:		
Caren M	ahy		305 731-5	174	
	Name o	f Person	Area Code	Daytime Telephone Number	
Enclosed	is a check for th	ne following amount:			
<b>\$2</b> 5.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addres		Street Addi		
Registration Section Division of Corporations			Registration Section Division of Corporations		
	P.O. Box 632	7	The Centr	e of Tallahassee	
	Tallahassee, I	FL 32314	2415 N. N	1onroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lucy & Co

(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) iability Company)				
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000026573</u> .	were filed on 1/11/2021	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil	lity company here:				
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbrev	riation "L.L.C."			
Enter new principal offices address, if applicable:		7,7,7			
(Principal office address MUST BE A STREET ADDRESS)	! .	(E			
-		- <del>-</del>			
Enter new mailing address, if applicable:		P# 12			
(Mailing address MAY BE A POST OFFICE BOX)					
The state of the s		<del></del>			
B. If amending the registered agent and/or registered office as agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:		f the new registered			
	Enter Florida street address				
	, Florida	Zip Code			
	City	2 <i>ір Со</i> йе			
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am fam rovided for in Chapter 605, F.S. Or, if t	iliar with and his document is			

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
CEO	Jose Miranda	3721 SW 88th Place Unit A	■Add
		Miami FL 33165	□Remov <b>e</b>
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ctive data if other than the	date of filing:		(optional)	
effective date is listed, the date mus	st be specific and cannot be prior to d	late of filing or more than 90	days after filing.) Pursu	
e: If the date inserted in this blument's effective date on the D	ock does not meet the applicable	e statutory filing requiren	nents, this date will n	ot be listed
	YP			
and enocifies a dalayed effective	e date, but not an effective time.	at 12:01 a.m. on the ear	lier of: (b) The 90th	day after th
ifiled.	e date, but not all effective tille.	, at 12.01 a.m. on the call	or. (b) The 70th	
June 10th ed	2021			
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	12.00 IV	_,		

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