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COVER LETTER

Division of Cor	porations		
subject:	Lauren Ash Name of Lim	Ly Company Lited Liability Company	122
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
		.	
Please return all correspo	ondence concerning this matter	to the following:	
	Des	Fin Harlus Name of Person	
	The Lauren	Ashley Compa	my, LLC
	341	Sandspur Ra	/
	Maitland	Address Address City/State and Zip Code (Y (Impany @ 9) to be used for future annual report notional:	1 SAY 2
	Janrinash!	City/State and Zip Code (Y (m p o n y @ 9)	nail, com
For further information c	oncerning this matter, please co	all:	The second of th
		at (225) 328 Area Code Daytim	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne 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 Addres Registration 5		Street Address: Registration Sec	etion
13		D: : :	_ * *

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section

TO:

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(A Florida Limited Liability	
The Articles of Organization for this Limited Liability Company were fi	iled on $\frac{02/19/2021}{}$ and assigned
Torida document number <u>L2100083849</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	mpany here:
The new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	2211
	<u> </u>
	24
Enter new mailing address, if applicable:	ुन कु है।
Mailing address MAY BE A POST OFFICE BOX)	The N est
	<u> </u>
3. If amending the registered agent and/or registered office address agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	on our records, <u>enter the name of the new reg</u> i
	Enter Florida street address

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 = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBK	Lauren Chin	341 Sandspur Rd	Add
		Maitland, FL 32751	🗆 Remove
	, , , , ,		Change
AMBR	Destin Harens	341 Sandspar Rd	ZAdd
			□Remove
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n effectiv	re date is liste	ed, the date m	iust be specific	and cannot be pot meet the ap	prior to date of	filing or me	ore than 9	0 days afte	r filing	j.) Pursi	uant to 605.02
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