

121 0000 88219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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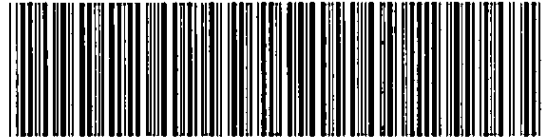
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Royale Melanin LLC  
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:

LaChrissa Glover  
Name of Person

Royale melanin  
Firm/Company

123 moreno Court  
Address

pensacola FL, 32507  
City/State and Zip Code

Royale melanin 2731@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LaChrissa Glover at (850) 382-6183  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Royale Melanin 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 02/22/2021 and assigned Florida document number L21000088219

This amendment is submitted to amend the following:

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

Royale melanin 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)**

123 Moreno Court

Apt. 123

Pensacola, FL 32507

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

123 Moreno Court

Apt. 123

Pensacola, FL 32507

**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:

Relonda

Ferrell

New Registered Office Address:

7704 Brook Meadow pl

Enter Florida street address

Pensacola

City

Florida

32507

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.

Relonda Ferrell

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>	<u>Type of Action</u>
AMBR	Lachrissa Glaser	123 morena Court + pensacola	<input type="checkbox"/> Add
		FL, 32507	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Relonda Ferrell	7704 Brook Meadow	<input type="checkbox"/> Add
		place pensacola FL, 32514	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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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.

**Dated**

March 17, 2021

La Oressa Klawer

Signature of a member or authorized representative of a member

La'Chrissa Glover

Typed or printed name of signee