

L21 000091528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

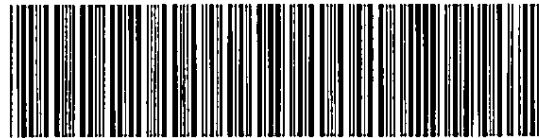
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21 APR -5 AM 11:44
RECEIVED
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIMITLESS KREATIONZ LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHRISTINE MURPHY

Name of Person

LIMITLESS KREATIONZ LLC

Firm/Company

1663 South East 27th Drive Unit 201

Address

Homestead Florida 33035

City/State and Zip Code

cdj376@yahoo.com

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

For further information concerning this matter, please call:

Christine Murphy

302 685-1109
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
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

FILED
DIVISION OF CORPORATIONS
21 APR -5 AM 11:44

LIMITLESS KREATIONZ 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 02/24/2001 and assigned
Florida document number 121000091528.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

1663 South East 27th Drive Unit 201

(Principal office address MUST BE A STREET ADDRESS)

Homestead Florida 33035

Enter new mailing address, if applicable:

1663 South East 27th Drive Unit 201

(Mailing address MAY BE A POST OFFICE BOX)

Homestead Florida 33035

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:

1663 South East 27th Drive Unit 201

Enter Florida street address

Homestead

Florida 33035

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

AMBR = Authorized Member

SECTION OF CONFIDENTIAL

21 APR -5 AM 11:45

[illegible]

21 APR -5 AM 11:45

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 25, 2021

ପଠନୀଆବାଦର ଚ୍ୟ

Christine Murphy

~~—C1934B2282B34EB~~

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00