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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GLOBAL SUCCESS INVESTMENTS LLC

Account Number : I20200000016 Phone : (954)903-4036 : (954)246-0340 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PACKAGING BOUTIQUE LLC

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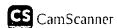
ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PACKAGING BOUTIQUE LLC		
(Name of the Limited (A	Liability Company as II now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L21000094838	oility Company were filed on 02/25/2021	and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicab	ele:	. <u>. </u>
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office address on our records, <u>enter the name</u> <u>here</u> :	of the new registered
No see of No. 10 a Versand America		025
Name of New Registered Agent:		. == 71
New Registered Office Address:	Enter Florida street address	ن ــــ
	Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Re-	prefet Agent:	. 25
provisions of all statutes relative to the proper accept the obligations of my position as revisto	agent and agree to act in this capacity. I further agr and complete performance of my duties, and I am fo ared agent as provided for in Chapter 605, F.S. Or, i gistered office address, I hereby confirm that the lim lange.	uniliar with and If this document is
	If Changing Registered Agent, Signature of New Reg	istered 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

Title	Name	Address	Type of Action
AMBR	Julieta Aristizabal	730S Sterling Avenue	🗀 Add
		Tampa Florida 33609	喜Remove
			□ Change
			🗆 Add
			□Remove
			□Change
			□ Add
			□Remove
			Change
			🗆 Add
			🗆 Remove
			□Change
			DAdd
			□Remove
			Change
			Dadd
			□Remove
			□Change



From: Oscar G. .

Catalina Catano

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ffect	ive date, if other than the date of filing:
an eff	ive date, if other than the date of filing:
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.
	·
recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
i is fi	
ated	1/3/2025
	011 04
	Signature of a member or authorized representative of a member