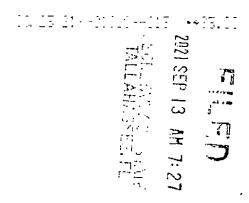
LZ100013Z994

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Office Use Only



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n RRUCE SEP 22 2021 July 19, 2021

JESSICA ROTTERMAN 3101 S OCEAN DR. APT 1908 HOLLYWOOD, FL 33019

SUBJECT: MINDFULJESS LLC Ref. Number: L21000132994

We have received your document for MINDFULJESS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce Corporate Records Supervisor II Letter Number: 921A00016512

www.sunbiz.org

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:		I JUS LLC ited Liability Company		
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Je55	ica Rutterman		
		Name of Person		
		Firm/Company	<u> </u>	
	3101 Soca	Ar apt 1908 Address		
	Hullywood, 1	F1 33019 City/State and Zip Code		
		City/State and Zip Code	20)	
	E-mail address: (to be used for future annual report notif	ication)	
For further information co	oncerning this matter, please co	all:	WAS	4
Jessica Ro Name o	ot termon f Person	at (<u> </u>	PACISEP 13 AH 7: 2	
		,	28 E	
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 S		<u>Street Address:</u> Registration Sec	tion	
Division of C		Division of Con		
P.O. Box 632	7	The Centre of T	allahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mindfulless LLC (Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.)	.		
(A Fiorida Limited Li	авину Сопірапу)			
The Articles of Organization for this Limited Liability Company w	vere filed on $03/22/20$	21 2	and ass	igned
Florida document number <u>L 2 1000 132994</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabil	ity company here:			
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or th	e abbrevia	tion "L.	L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
				
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ldress on our records, <u>enter the n</u>	ame of t	<u>he</u> nev	<u>v registered</u>
Name of New Registered Agent:			202	
New Registered Office Address:			3S I	- — - 'j'j
New Registered Office Address.	Enter Florida street address	HAS.	<u> </u>	Tonas
	, Florida	00 70	Code	77
New Registered Agent's Signature, if changing Registered Agent:	·,		7.	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a	performance of my duties, and I a vovided for in Chapter 605, F.S. (m famili Or, if thi	iar wit 's docu	h and unent is

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AP	Yose Rotterman	511 SE 5 TINE	□Add
		APT 2314	⊠ Remove
		Fort Landerdale, 33301	□Change
MGR	Jessica Roterman	3101 5 0000 dr	Æ JAdd
		APT 1908	□Remove
		Hollywood, FL 33019	□Change
			□Add
			Change DAdd
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			□Remove
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te: If the d	ate inserted in this	block does not i	meet the applical				
cument's ef	fective date on the	Department of S	State's records.				
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is filed.	fies a delayed effect	ive date, but no	can enective un	e, at 12,01 a.m.	on the earner or, (D) The 90th day	aner me
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ted	September	17'	. 2021	_·			
			1 Ass				
				ized representative			

Typed or printed name of signee