L21000134088

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D. BRUCE MAY 20 2021

i O: Kegistration S Division of Co			
SUBJECT:	LOVEHTTIRE L	1.0	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Donna 1	Michelle Overtor	J
		Firm/Company	
	18127	Sweet Jasmin	e Drive
		FL 33647 City/State and Zip Code	
	E-mail address: (to be used for future annual report notific	ation) 2021
For further information o	concerning this matter, please ca	all:	ation) A 20 PH 8: 0
		at ()	
Name o	f Person	Area Code Daytime	Felephone Number
Enclosed is a check for t	he following amount:		.r C 1
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration		<u>Street Address:</u> Registration Sect	ion

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

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

ARTICLES OF ORGANIZATION OF

Love A	thre LLO	<i>y</i>			
(Name of the Limited Liabil (A Florid	lity Company as it now a la Limited Liability Comp	ppears on our records.) any)			
The Articles of Organization for this Limited Liability (Florida document number <u>L2100134088</u>	Company were filed o	m 3/22/20)2 <u>/</u> an	kd assig	ned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	nited liability compa	ny here:			
The new name must be distinguishable and contain the words "Lin	mited Liability Company,	"the designation "LLC" of	or the abbreviation	on "L.L.	C."
Enter new principal offices address, if applicable:				202	
(Principal office address MUST BE A STREET ADD.	RESS)		<u> </u>	<u>=</u>	177. W. 1
		<u> </u>	77.	10	7-77
Enter new mailing address, if applicable:			<u> </u>	P	. •)
(Mailing address MAY BE A POST OFFICE BOX)				8: 05	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		our records, <u>enter th</u>	ne name o <u>f th</u>	e new i	registered
Name of New Registered Agent:	Donna	Michelle	Overto	1	 -
New Registered Office Address:	Ent	er Florida street address			
		, Flor	ida	_	
 -	City			Code	
New Registered Agent's Signature, if changing Registered	ed 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



MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
CED	Donna Michelle		_ 🗆 Add
•	•		_ [] Remove
			_ Change
AMBR	Donna Michelle Overton		_ CLAdd
	()verton		_ []Remove
			<u> </u>
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			_ 🗆 Add
			Remove
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-			_ □Add
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			_ [] Change
			_ 🗆 Add
			_ 🗆 Remove

□~**L**......

D. If amending any other information, enter change(s) here: (Attach additional sheets, if neces	ssary.)		
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		2021	•
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	77. 77.	0	
	5/3 (737 (737)	PH 8:	
	7	05	-
			-
E. Effective date, if other than the date of filing: (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 to Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	iling.) Pursua	nt to 605 t be list	5.0207 (3)(ted as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) record is filed.	The 90th o	lay afte	er the
Dated 5/20/2021 Signature of a member of authorized representative of a member			
John Durton Typeder printed name of signee			