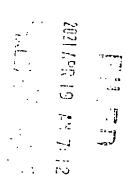
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(Re	questor's Name)	
(Ad	dress)	··-
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



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COVER LETTER

	Registration Se Division of Cor					
eun lec	SOAPFIRE	ELLC	,•			
SUBJEC	·	Name of Lin	nited Liability Company			
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please ret	urn all correspo	ondence concerning this matter	to the following:			
		CRYSTAL M BAKER				
			Name of Person			
		SOAPFIRE LLC				
Firm/Company						
		1400 7TH AVE N				
			Address			
ST. PETERSBURG, FL 33705						202
City/State and Zip Code				, <u>123</u> .	F-1	
		CMB0509@YAHOO.CON				≥ÿ —
13 - 6 - 4			to be used for future annual report not	ilication)		19 /
ror minne	r information c	oncerning this matter, please c	all:			Ē
CRYSTA	L M BAKER		813 3177423 at ()			7: :
	Name o	f Person		ne Telephone Number	. , ,	10
Enclosed	is a check for th	ne following amount:				
■ \$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Fili Certificate Certified ((additional c	of Statu Copy	
	Mailing Addres		Street Address:	action		
	Registration S Division of C		Registration Se Division of Co			
F	P.O. Box 632	.7	The Centre of	Tailahassee		
1	Fallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 81	0	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOAPFIRE LLC						
(Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appea Liability Company)	rs on our records.)	•	_	
The Articles of Organization for this Limited I	Liability Company	were filed on 03	/26/2021	and	l assigne	ed
Florida document number L21000142014	·					
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liab	ility company ho	ere:			
SOAPFIRE LLC						
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the d	lesignation "LLC" or the a	bbreviation	a "L.L.C."	**
Enter new principal offices address, if appli	cable:	1400 7TH AVE	EN			
(Principal office address MUST BE A STREET ADDR.		ST. PETERSBURG, FL 33705				
Enter new mailing address, if applicable:		1400 7TH AVE	EN JRG, FL 33705			
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and/or agent and/or the new registered office addre	registered office a			ne of the	new3re	gistere
				(~~~		.]
Name of New Registered Agent:	CRYSTAL M	BAKER		- :		723
New Registered Office Address:	1400 7TH AVE				- ₹ ₹	
		Enter Floi	rida street address	- · :	\exists	المبيدة
	ST. PETERSBU		, Florida ³³	705 ;	12	
		City		Zip Co	ode	

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 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
MGR	CRYSTAL M BAKER	1400 7TH AVE N	= Add
		ST. PETERSBURG, FL 33705	□Remove
			□Change
AMBR	STEFFAN A BOULE	1400 7TH AVE N	
		ST. PETERSBURG, FL 33705	
			Change
			□Add
			Remove (2)
			Add
			□Change
	 		DAdd
			□Remove
			☐ Change
			□Add
			Remove
			□ Change

		
		
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Filing Fee: \$25.00