## L21000144727

(Requestor's Name)
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(Document Number)
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## **COVER LETTER**

TO:	Registration Section Division of Corpora			
SUBJI	ест: <u>Ра</u>	rty life Name of Limi	365 CCC ited Liability Company	<del> </del>
The en	closed Articles of Amer	ndment and fee(s) are subr	mitted for filing.	
Please	return all correspondence	ce concerning this matter t	to the following:	
	_		Name of Person	
	_	Party	LiFe 365 LL Firm/Company	<u>.c</u>
	_	1451 W	CYPIESS Creek	Dr#300
	_	Fort Lava Party 15 Cit	derdale, FL 3 City/State and Zip Code Fe 36568 mail, o be used for future amual report notifi	Com = = = = = = = = = = = = = = = = = = =
For fur	ther information concer	ning this matter, please ca		င်ာ
	1elvina Par Name of Perso	on .	at ( <u>954)</u> <u>439 - 1</u> Area Code Daytime	5226 FH 72: 38 Telephone Number FH 38
Enclos	ed is a check for the foll	lowing amount:		
<b>\$√</b> \$2	5.00 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	on	Street Address: Registration Sec	tion

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

The Articles of Organization for this Limited Liability Company were filed on	03/29/2021 and a	ssigned
Florida document numberL21000144727	1 1	J
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company he	re:	
he new name must be distinguishable and contain the words "Limited Liability Company," the d	signation "LLC" or the abbreviation "	L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
	=======================================	
	c's	
nter new mailing address, if applicable:		
	-	
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	7H/2: 38	· ·
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## 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.

Enter Florida street address

, Florida

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = AMBR =	Manager Authorized Memb	er		
<u>Title</u>	<u>Name</u>		Address	Type of Action
MGR	Betsy	<u>Germain</u> Evan	\$ 2350 N University Dr #848712 Pembroke Pines, FL330	NAdd 34□Remove
MGR	<u>Me Ivino</u>	Paul	2630 NW 67th Terr Margate, FL 33063	_ □Change _ □Add (Keep) _ □Remove
MGR	<u>Devonne</u>	<u>Waters-D</u> avis		
MGR	Michele	2 Liberis-McA	Jabb 1451 W (ypress (re Ste 300 Fort Lauderdale, FL 3330	_ □Change RO K□Add / Keep SAMe I □Remove
MGR_	Silvienne		14800 Ne 10th Ave North Miami, FL 3316	<b>-</b> ,
				☐ Change ☐ Add ☐ CD ☐ Add ☐ CD

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Filing Fee: \$25.00