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## **COVER LETTER**

Division of Co	
SUBJECT:	Elight for Party Rentals, LLC. Name of Limited Liability Company
The enclosed Articles o	f Amendment and fee(s) are submitted for filing.
Please return all corresp	ondence concerning this matter to the following:
	Jordy Ruiz Velasco Name of Person
	Delightful Party Rentals, Itc
	3382 Bonito Un Address
	margale FL 33063
	margale FL 33063  City/State and Zip Code  Jordy a Riz Chotmail. Com  E-mail address: (to be used for future annual report notification)
	oncerning this matter, please call:
evi 27 Flo	res a hotmail. com at (954) 261-6559  Person Daytime Telephone Number
Enclosed is a check for th	e following amount:
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee.  Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Registration S	

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

FILED

DElightful Par	ty Rentals,1	2021 SEP 13 PI	4 4:07
( <u>Name of the Limited Liabi</u> (A Flori	Hy Rentals Lility Company as it now appears da Limited Liability Company)	ON OBFICERED RY OF	SIAH
The Articles of Organization for this Limited Liability	Company were filed on		and assigned
Florida document number <u>L2100015</u> 7 15		<u> </u>	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company her	<u>æ</u> :	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the de-	signation "LLC" or the abb	previation "L.L.C"
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD)	 RESS)		
	<del></del>		
	<del></del>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our rec	ords, <u>enter the name</u>	of the new registere
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	i street address	
		Florida	
	City		Zip Code

## 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 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
AMBR	AShley Flores	3382 Bonito: Ln Margo Florida 33063	He I Add
			□Remove
			□ Change
	·		_ 🗆 Add
		· -	⊡Kemove
			□Change
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Effective date, if other than the date of filing: Plus to defend a control of the
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the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o ) The 90th day after the record is filed.
Dated 09/05/2021
_ Lorda Luz
Signatury of a member or authorized representative of a member
Tordy Kvin. Tord or printed name of signee

Page 3 of 3

Filing Fee: \$25.00