121000168944

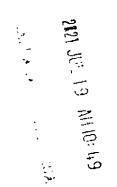
(Re	equestor's Name)	
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	y/State/Zip/Phone	
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PICK-UP	☐ WAIT	MAIL
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Certified Conjes	Cortificator	of Ctatus
Certified Copies	_ Certificates	or Status
Special Instructions to	Filing Officer:	
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Office Use Only



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07/19/21--01008--010 **25.00



COVER LETTER

TO: Registration S Division of Co				
Look at He SUBJECT:				
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	binitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Danny Anderson			
		Name of Person	 	
		Firm/Company		
	2150 Lake Drive		<u> </u>	
		Address		
	Winter Park, Fl 32789			
		City/State and Zip Code		
	danny.anderson@ioausa.co			
For further information c	r-man address: (concerning this matter, please c	to be used for future annual report not call:	tification)	
Danny Anderson		407 2570949 at ()		
Name o	f Person	Area Code Daytir	ne Telephone Number	
Enclosed is a check for the	he 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 Address		Street Address:		
Registration 5 Division of C		Registration Section Division of Corporations		
P.O. Box 632	7	The Centre of	Tallahassee	
Tallahassee, I	FL 32314	2415 N. Monro	be Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Look at Her, LLC	<u></u>	
(<u>Name of the Limited</u>) (A	Liability Company as it now appears on of Florida Limited Liability Company)	our records.)
he Articles of Organization for this Limited Liab	lity Company were filed on $\frac{4/12/21}{1}$	and assigned
lorida document number 1.21000168944	·	
his amendment is submitted to amend the followi	ng:	
. If amending name, enter the new name of th	e limited liability company here:	
NA.		
he new name must be distinguishable and contain the word	s "Limited Liability Company," the designa	ition "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicabl	e: <u>NA</u>	28
Principal office address MUST BE A STREET A	(DDRESS)	<u> </u>
nter new mailing address, if applicable:	ÑΑ	
Mailing address MAY BE A POST OFFICE BO	X)	-
		· •
. If amending the registered agent and/or regis	stered office address on our record	ls, enter the name of the new regi
gent and/or the new registered office address h	ere:	
Name of New Registered Agent:	VA	
New Registered Office Address:		
New Registered Office Address.	Enter Florida str	vet address

_		Florida

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.

City

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	Kim Anderson	2150 Lake Drive	
		Winter Park, FI 32789	■Remove
			□ Change
			□Add
			□Remove
		·	☐Change
			Add
			☐Remove : ☐ : 戶 ☐Shange
			□Remove
			□Add
			□Remove
			☐ Change
			□Remove

	2121
	£0
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior ote: If the date inserted in this block does not meet the application occurrent's effective date on the Department of State's records.	to date of filing or more than 90 days after filing.) Pursuant to 605.020 able statutory filing requirements, this date will not be listed a
record specifies a delayed effective date, but not an effective till is filed.	me, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ned 1/12/2/	·
Signature of a member or author	orized representative of a member
The state of the s	

State of Florida Department of State

I certify from the records of this office that LOOK AT HER, LLC, is a limited liability company organized under the laws of the State of Florida, filed electronically on April 12, 2021, effective April 12, 2021.

The document number of this company is 1.21000168944.

I further certify that said company has paid all fees due this office through December 31, 2021, and its status is active.

I further certify that this is an electronically transmitted certificate authorized by section 15.16. Florida Statutes, and authenticated by the code noted below.

Authentication Code: 210420214248-800363921758#1

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twentieth day of April, 2021



Laurel M. Lee Secretary of State



June 28, 2021

DANNY ANDERSON 2150 LAKE DRIVE WINTER PARK, FL 32789

SUBJECT: LOOK AT HER, LLC Ref. Number: W21000093343

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the **complete document**, including the <u>electronic filing cover sheet</u>.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

If you have any further questions concerning your document, please call (850) 245-6052.

Letter Number: 721A00014702

Alannah M Carranza Regulatory Specialist II New Filings

COVER LETTER

ТО:	New Filing Se Division of Co					
SUBJE	LOOK AT	HER. LLC				
	<u> </u>	Na	ne of Limited	Liability Company		
The enc	losed Articles of	Organization and	fee(s) are sub	mitted for filing.		
Please re	eturn all corresp	ondence concernin	ig this matter t	o the following:		
	Danny Ando	erson				
			Na	me of Person	<u>-</u>	
			Fir	m/Company		
	2150 Lake D	rive				
				Address		<u> </u>
	Winter Park.	Florida 32789				
	danny.anderso	n@ioausa.com	City/Sta	te and Zip Code		
	E	-mail address: (to	be used for fu	ure annual report n	otificatio	n)
For further	information cor	cerning this matte	r, please call:			
	Danny Anders	son	407 at (2570949		
	Name	of Person	Area Co	de Daytime Te	lephone l	Number
Enclosed i	is a check for th	e following amoun	t:			
≣ \$125.00	9 Filing Fee	□\$130.00 Filing Certificate of Sta	itus Ce	\$155.00 Filing Fee ertified Copy tional copy is enclo	sed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
	New Fili Division P.O. Bo:	Address ng Section of Corporations x 6327 see, FL 32314		Street Address New Filing Sec The Centre of 2415 N. Monro Tallahassec, FL	tion Divis Fallahasse oe Street,	ee

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LOOK AT HE	R, LLC		
(Mu	st contain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")
RTICLE II - Address:			
he mailing address and s	treet address of the principal	office of the Limited	Liability Company is:
<u>P</u>	rincipal Office Address:		Mailing Address:
2150 Lake Dri	ve		
= 100 0000			
Winter Park Fl	orida 32789		
Winter Park Fl RTICLE III - Registere The Limited Liability Con	ed Agent, Registered Office	n Registered Agent. Y	t's Signature: 'ou must designate an individual o
Winter Park Fl RTICLE III - Register The Limited Liability Contother business entity wi	ed Agent, Registered Office	n Registered Agent. Y on.)	t's Signature: 'ou must designate an individual o
Winter Park Fl RTICLE III - Register The Limited Liability Contother business entity wi	ed Agent, Registered Office npany cannot serve as its ow th an active Florida registrati	n Registered Agent. Y on.) d agent are:	t's Signature: 'ou must designate an individual o
Winter Park Fl RTICLE III - Register The Limited Liability Contother business entity wi	ed Agent, Registered Office op any cannot serve as its own than active Florida registrationstreet address of the registere	n Registered Agent. Y on.)	t's Signature: 'ou must designate an individual o
Winter Park Fl RTICLE III - Register The Limited Liability Contother business entity wi	ed Agent, Registered Office op any cannot serve as its own than active Florida registrationstreet address of the registere	n Registered Agent. Y on.) d agent are:	t's Signature: 'ou must designate an individual o
Winter Park Fl RTICLE III - Register The Limited Liability Contother business entity wi	ed Agent, Registered Office inpany cannot serve as its own the an active Florida registrati street address of the registere Danny Anderson 2150 Lake Drive	n Registered Agent. Y on.) d agent are:	ou must designate an individual o
Winter Park Fl RTICLE III - Register The Limited Liability Contother business entity wi	ed Agent, Registered Office inpany cannot serve as its own the an active Florida registrati street address of the registere Danny Anderson 2150 Lake Drive	n Registered Agent. Yon.) d agent are: Name	ou must designate an individual o

 $H\epsilon$ plfu 1 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
Danny S Anderson	2150 Lake Drive Winter Park, Florida 32789
	77.1101 7 driv. 1 (07.00 52.10)
	
	e date of filing: 4/12/2021 (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days after
he date of filing.)	not meet the applicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	
	n, 6 7
	•
<u>REOUIRED</u> SIGNATÚRE: -	λ_{i} (1.1)
x = x	Vaun Han
Signature of	a member or an authorized representative of a member.
This document is e	executed in accordance with section 605.0203 (1) (b), Florida Statutes.
	v false information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.
constitutes a time (Diament A Jacobs
	WHINY MADERSON
	Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)