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COVER LETTER

то:	Registration Sec Division of Corp			•
23 115 11		s in ALL shades LLC		
SUBJ	EC1:	Name of Limite	ed Liability Company	
The er	nclosed Articles of A	amendment and fee(s) are subm	nitted for filing.	
Please	return all correspon	dence concerning this matter to	the following:	
		Angela Gamer		
			Name of Person	
		ZenBusiness, Inc.		
			Firm/Company	
		5511 Parkcrest Drive, Suite	103	
			Address	
		Austin, TX 78731		
			City/State and Zip Code	
		fulfillment@zenbusiness.cor		·
		E-mail address: (to	o be used for future annual report notific	cation)
For fu	irther information co	oncerning this matter, please ca	II:	
Ange	ela Garner c/o ZenBi	usiness, Inc.	844 493-6249 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclo	osed is a check for th	e 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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOVE comes in ALL shades LLC		
(Name of the Limited Liability (A Florida I	y <u>Company as it now appears on our records.</u>) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number 1.21000169677	ompany were filed on 04/12/2021 and assign	ied
Torida document number 121001100110011001100110011001100110011	_·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	sed liability company here:	
	202 SE	
he new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the aboreviation "L.L.C"	
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·	=== ===
Principal office address MUST BE A STREET ADDRI	ESS)	
	SEE BT	
Inter new mailing address, if applicable:	· F 7	
Mailing address MAY BE A POST OFFICE BOX)		
	ered office address on our records, enter the name of	the no
egistered agent and/or the new registered office addre	<u>ess here</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City Zin 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>	<u>Address</u>	Type of Action
AMBR	Natalic Anne Padavano		Add
			Remove
		2303 Black Lake Boulevard Winter Garden, FL 34787-4756	■ Change
			Remove
			Change
			Add
			Remove
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Effective date if other than the	1 4 6 611				,	
Effective date, if other than the if an effective date is listed, the date mus Note: If the date inserted in this blodocument's effective date on the Document	t be specific and ock does not m	cannot be prior neet the applic	able statutory f	or more than 90 da Iling requiremen	(optional) ys after filing.) Purs its, this date will r	uant to 605.0207 not be listed as
ne record specifies a delayed The 90th day after the rec	effective d ord is filed.	ate, but no	t an effectiv	e time, at 12	2:01 a.m. on tl	he earlier o
Dated September 28		2021	<u> </u>			
/5,	/ Natali Signature of a n	r. Le Anne nember or autho	Padava orized representa	no tive of a member		
			ca representa	are or a member		
Natalie Anne Padavano						

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Filing Fee: \$25.00