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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)
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(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

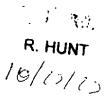




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COVER LETTER

TO: Registration Se Division of Cor			
LPG INVE	STS LLC		
SUBJECT:	Name of Lim	ited Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Paula Grant-Gonzalez		
		Name of Person	
	LPG PROPERTIES LLC		
		Firm/Company	
	720 US HWY 441 Suite 20	084	0147 202
		Address	01415108.0 2023 OCT
	Lady Lake, FL 32159		01413108 67103 2023 OCT 23
		City/State and Zip Code	,
	pgrant@forgranted.events		PH 12: 40
	E-mail address: (to be used for future annual report notification)	
For further information of	oncerning this matter, please c	all:	
Paula Grant-Gonzalez		352 640-9440 at ()	
Name o	of Person	Area Code Daytime Telephone Nun	nber
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certification	O Filing Fee, ficate of Status & fied Copy fied copy is enclosed)
Mailing Address Registration S Division of C	Section	Street Address: Registration Section Division of Corporations	
P.O. Box 632	•	The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LPG INVESTS LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.21000204801	were filed on MAY 17, 2021	and assigned
This amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
MYSTERY LOVES COMPANY LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	3427 WARM SPRINGS AVENUE, SUITE 147	
Principal office address MUST BE A STREET ADDRESS)	THE VILLAGES, FL 32163	
	720 US HWY 441 2084	01/1810/R 2023 OCT
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)	LADY LAKE, FL 32159	23 5
		PH 12:
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name	of the new regi
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida 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
			□Add
			□Remove
			☐Change
			□Add
			□Remove
			□Change
			25. Six Six Six Six Six Six Six Six Six Six
			DIVISION TAKY DIVISION TO COMPANY CO
			□Remove
			Change
			□Add
			□ Remove
			Change
			□ Add
			□Remove
			□Change

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Paula May - Monsale Signature of a member of a phonoised personnative of a member	
PAULA GRANT-GONZALEZ	