

# L21000216133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

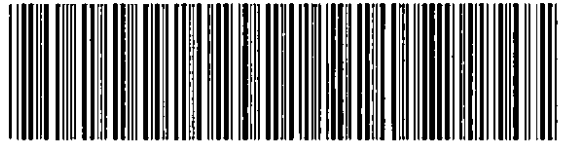
(Document Number)

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OFFICE OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2023 FEB 21 AM 11:31

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Flowers weaving LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ and assigned  
file number L21000216133

This amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

If new principal offices address, if applicable:

principal office address MUST BE A STREET ADDRESS)

If new mailing address, if applicable:

mailing address MAY BE A POST OFFICE BOX)

If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

\_\_\_\_\_, Florida

*City*

*Zip Code*

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 understand 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

pending Authorized Person(s) authorized to manage. enter the title, name, and address of each person being added or removed from our records:

R = Manager  
BR = Authorized Member

| <u>Name</u> | <u>Address</u> | <u>Type of Action</u>           |
|-------------|----------------|---------------------------------|
| _____       | _____          | <input type="checkbox"/> Add    |
| _____       | _____          | <input type="checkbox"/> Remove |
| _____       | _____          | <input type="checkbox"/> Change |
| _____       | _____          | <input type="checkbox"/> Add    |
| _____       | _____          | <input type="checkbox"/> Remove |
| _____       | _____          | <input type="checkbox"/> Change |
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| _____       | _____          | <input type="checkbox"/> Remove |
| _____       | _____          | <input type="checkbox"/> Change |
| _____       | _____          | <input type="checkbox"/> Add    |
| _____       | _____          | <input type="checkbox"/> Remove |
| _____       | _____          | <input type="checkbox"/> Change |

Amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I Leon Flowers Giving Alan Mitchell 10<sup>cs</sup>

OF Flowers starting Feb 21 2023

The 10<sup>cs</sup> will go back TO Flowers unless IF Alan Mitchell no longer works  
There For any reason if /

Alan Mitchell

Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the [is filed.

Dated 2-21-2023

Leon E Flowers  
Signature of a member or authorized representative of a member

Leon Flowers  
Typed or printed name of signee