L21000216814

(Requestor's Name)	
(Address)	9003693
(Address)	
(City/State/Zip/Phone #)	37, 611 <u>31</u> ++31
(Business Entity Name)	REC
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	



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COVER LETTER

TO: Registration Sc Division of Cor					
SUBJECT: LIME G	ROUP HOLDINGS, LLC				
	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:			
	MARA FREEMA	N			
		Name of Person			
•	LIME GROUP H	OLDINGS, LLC			
	<u> </u>	Firm/Company			
	2765 W. CYPRE	SS CREEK ROAD, STE B			
		Address			
	FORT LAUDER	DALE, FL 33309			
		City/State and Zip Code			
	-	WIZARDCREATIONS.COM	-		()
		to be used for future annual report notif	(cation)		
For further information of	concerning this matter, please c	all:			
FRANCES RODE	RIGUEZ	at (<u>561</u>) <u>886-5217</u>		:-	•
Name o	of Person	Area Code Daytimo	: Telephone Number	2	· i
Enclosed is a check for t	he following amount:			A 11: 2u	
☒ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Co (additional cop	of Status &	
Mailing Addre Registration Division of C	Section Corporations	Street Address: Registration Sec Division of Cor The Centre of T	porations		
P.O. Box 632	<u> </u>	The Centre of T	ananassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LIME GROUP HOLDINGS, I	LC_			
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appe a Limited Liability Company	ars on our records.)		
The Articles of Organization for this Limited Liability (Company were filed on _	05/10/2021	and a	ssigned
Florida document number <u>L21000216814</u>	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company l	nere:		
he new name must be distinguishable and contain the words "Lir	nited Liability Company," the	designation "LLC" or the	abbreviation "	L.L.C."
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADD.	<u> </u>			
Enter new mailing address, if applicable:				<u>(1)</u>
Mailing address MAY BE A POST OFFICE BOX)			-	<u> </u>
	· 			•
3. If amending the registered agent and/or registere	d office address on our	records, <u>enter the na</u>	me of the no	ew registe
gent and/or the new registered office address here:				ŧ
			- · ·	ز
Name of New Registered Agent:			2	
New Registered Office Address:			Ε.	
	Enter Fl	orida 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 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	MARA FREEMAN	2765 W. CYPRESS CREEK ROAD, STE B	⊠Add
		FORT LAUDERDALE, FŁ 33309	□Remove
			□Change
			□ Add
		-	□Remove
			□ Change
		·	□Add ♡
			□Remove
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	*1 ***		<u> </u>
			
			2=
ective date, if other than the date of filing: _		(optional)	
effective date is listed, the date must be specific and came: 1f the date inserted in this block does not meet	not be prior to date of filling or r	iore than 90 days after filing.) Pursuant to 605.02
ament's effective date on the Department of State	's records.	is requirement, this date	Will her the fished
ord specifies a delayed effective date, but not an c filed.	effective time, at 12:01 a.m.	on the earlier of: (b) Th	e 90th day after th
ed <u>(4</u> 30 ,	1021		
Mus			
Signature of a meni	ber or authorized representative	e of a member	
	·		

Filing Fee: \$25.00