## L21000263402

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	<del>)</del>
(D	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

TO: Registration Se Division of Cor				
	festyle Products, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.		
Please return all correspo	ndence concerning this matter	to the following:		
	Lionel Ferreira			
		Name of Person		
	Ferreira Lifestyle Products	i		
		Firm/Company		
	H10 Audace Avenue, Uni	1411		
		Address		
	Boynton Beach, FL 33426			
		City/State and Zip Code	*	
	lionel@ferreiradesign.com	to be used for future annual report notifi	dation)	
For further information c	oncerning this matter, please of		Carony	
Laura Ferreira		678 9070103		Rez
Name o	f Person		Telephone Number	
				[ ] [ ]
Enclosed is a check for the		_		> 1
\$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fo Certificate of St Certified Copy (additional copy is a	e anixe J
<u>Mailing Addres</u> Registration S		Street Address: Registration Sec	tion	
Registration .	Jeenon	registration see		

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ferreira Lifestyle Products, LLC		
(Name of the Limited Liability Compa (A Florida Limited	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 06/04/2021	and assigned
Florida document number L21000263402		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
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 i	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	\(\frac{\sigma}{\sigma} \cdot \frac{\zeta}{\zeta} \)
		> 11
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		24

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

Title	<u>Name</u>	Address	Type of Action
AMBR	Lionel Ferreira	1110 Audace Ave Apt 411	■Add
		Boynton Beach, FL 33426	Петюче
AP Laura Ferreira	1110 Audace Ave Apt 411		
		Boynton Beach, FL 33426	■Remove
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ffective date, if other than the date of filing:	ocument's effective date on the Department of State's records.	quirements, this date with the or thread a
ffective date, if other than the date of filing:  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 605.020 (ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ocument's effective date on the Department of State's records.		
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a		he earlier of: (b) The 90th day after the
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a	1 22 / 2021	
fote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ocument'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 list filed.	June 23 / / C 2021	
(ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ocument'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	ated	

Filing Fee: \$25.00

Typed or printed name of signee