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2022 CCT 17 FM 2: 44 SECONDARY SEED JRIDE TALL AND SSEED JRIDE

Glambankzluxe LLC SUBJECT: _____ Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Ayanna Bryant Name of Person Firm/Company 515 E Las Olas Blvd Ste 120 Address Fort Lauderdale, FL, 33301 City/State and Zip Code ayannabryant@glambankzluxe.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 6768261 786 Ayanna Bryant Daytime Telephone Number Area Code Name of Person Enclosed is a check for the following amount: № \$25.00 Filing Fee ☐ \$60.00 Filing Fee. ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & Certificate of Status & Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations**

TO:

Registration Section
-Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF ORGANIZATION OF

Glambakzluxe LLC					
(Name of the Lim	ited Liability Compan (A Florida Limited Li	y as it now appears on our re- ability Company)	cords.)		
The Articles of Organization for this Limited I	Liability Company v	were filed on (06/10/2021		_and assig	ned
This amendment is submitted to amend the fol	llowing:				
A. If amending name, <u>enter the new name</u>	of the limited liabil	lity company here:			
The new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the designation "	LLC" or the abbrev	riation "L.L.0	C."
Enter new principal offices address, if appli	515 E Las Olas Blvd Ste 120 I	Fort Lauderdale, Fl	., 33301		
Principal office address MUST BE A STRE	ET ADDRESS)	<u></u>			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE		515 E Las Olas Blvd Ste 120 l			
B. If amending the registered agent and/or agent and/or the new registered office addr	- -	ddress on our records, <u>en</u>	iter the name o	the new (registe
Name of New Registered Agent:	Ayanna Bryant				
New Registered Office Address:	515 E Las Olas I	Blvd Ste 120 Fort Lauderdale		262P SS	
	Fort Lauderdale	Enter Florida street aa	, Florida 33301		
New Registered Agent's Signature, if changing	Registered Agent:	City	m.	Zip Co del	! !
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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.

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Ayanna Bryant	515 E Las Olas Blvd Ste 120 Fort Lauderdale, FL, 33301	≣ Add
			= Add
			Remove
			□ Change
AMBR	Ayanna Bryant	515 E Las Olas Blvd Ste 120 Fort Landerdale, FL, 33301	🗆 Add
			Remove
			□Change
			□Add
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ective date, if other than the	e date of filing:		(optional)	
ective date, if other than the effective date is listed, the date mue: 1 If the date inserted in this b	ist be specific and cannot be prior	to date of filing or more the	an 90 days after filing.) Pursua uirements, this date will no	int to 605.020 it be listed a
ument's effective date on the E	Department of State's records		an Chieffor and and an in-	· ou noise ·
cord specifies a delayed effective filed.	ve date, but not an effective t	ime, at 12:01 a.m. on th	e earlier of: (b) The 90th	day after th
October 11	2022			
ed	·	·		
<i>A</i> -				
Man	- Saulle			
	Signature of a member or auth	orized representative of a	nember	