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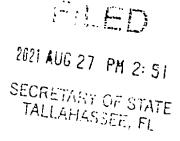
2021 AUS 27 PM 2: 51

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: LadieS Love Cool Bags LC 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:
Bernard Thanas Name of Person
Ladies Love (001 Bogs LLC Finn/Company)
601 N Ocean Street Apt 404
OCKSONVILL, FL 32202 City/State and Zip Code OVUM MY WEAHH 404 agmail Com E-mail address: (to be used for future annual report notification)
Grown Jweath 404 agmail Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bernard Thomas at (904) LOTH - 4417 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Second Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Topy (additional copy is enclosed)
Mailing Address: Registration Section Street Address: Registration Section

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



(Name of the Limited Limbility Company as it now appears by our records.)
(Name of the Limited Liability Company as it now appears by our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on <u>Oune 17, 2021</u> and assigned Florida document number <u>L21000287503</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Ladies Love Cool Bags LUC The new name must be distinguishable and contain the words "Limited Distility Company," the designation "LLC" or the abbreviation "L.L.C."
The new name must be distinguishable and contain the words. Elimited Diability Company, the designation. Elect of the above factor.
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 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
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 an 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 **Type of Action** Address Title **Name** □Remove _____ Change _____ Change _____ □ Remove □Remove

_____ □Change

_____bbA□

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(If an off e c <u>Note:</u> I	e date, if other than the date of filing: tive date is listed, the date must be specific and cannot be prior to date of filing or more than 40 days after filing.) Pursuant to the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be at's effective date on the Department of State's records.		
e record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day it.	after the	
Dated _	Brown Thomas	_	
	Signature of a member or authorized representative of a member	-	
	Bernard Thomas		

Filing Fee: \$25.00