L21000341559

(Re	questor's Name)	<u></u>
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(Ad	dress)	······································
(Add	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
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(33		
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
	W23 - 6	1 9143

Office Use Only



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COVER LETTER

Registration Section

TO:

Division of Co	orporations		.
Ghana Be	erry LLC	4,	3
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	nondence concerning this matter	to the following:	
	Annie Gallon		
		Name of Person	
	Ghanc	Firm/Company	
	7175 East Bank Dr	,	
		Address	
	Tampa Fl 33617		
		City/State and Zip Code	
	anniebriading@yahoo.com		
	E-mail address: (to be used for future annual report noti-	fication)
For further information	concerning this matter, please or	all:	
Annie Gallon		813 306 3308	
Name	of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
_	~_		
Mailing Address Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Ghana Berry LLC

company has been notified in writing of this change.

2023 HAY 26 PH 3: 45

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

The Articles of Organization for this Limited Liability Company of	vere filed on July 28, 2021	and assigned
Florida document number <u>L21000341559</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
SaharaSand LLC Boutique LLC		
The new name must be distinguishable and contain the words "Limited Liabili	y Company," the designation "L	I.C." or the 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 acagent and/or the new registered office address here:	ldress on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	ress
		Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	erformance of my duties,	and I am familiar with and

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

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

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
		*****	🗀 Remove
			☐ Change
	<u>.</u>		□Add
			□Remove
			□ Change
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			□Remove
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i effect <u>te:</u> If	tive date is listed, the da Tthe date inserted in t		annot be prior to date o et the applicable stat		(optional) n 90 days after filing.) Pursuant to irements, this date will not be	
cord s		fective date, but not a	n effective time, at 1	2:01 a.m. on the	earlier of: (b) The 90th day	after the
ted (<u>)</u>	5/19/23		·			
	(A),n	1 Call	mber or authorized rep	resentative of a m	ember	_
	Annie) 'yped or printed name (