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| Special Instructions to Filing Officer: |
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COVER LETTER

| Div | ision of Corp | orations | | | | |
|----------------|-----------------|---|---|--|--|--|
| CHRICT. | | MERCHANDISE, LLC | | | | |
| SOBJECT: | | Name of Lim | ited Liability Company | | | |
| The englaces | d Amialog of A | mandment and facts) are sub | mitted for filing | | | |
| ÷ | | | | | | |
| Please return | i all correspon | dence concerning this matter | to the following: | | | |
| | | Lucas Perez | | | | |
| | | | Name of Person | | | |
| | | | | | | |
| | | | Firm/Company | Telephone Number \$60,00 Filing Fee. Certificate of Status & Certified Copy | | |
| | | 11260 SW 156 CT | | | | |
| | | | Address | | | |
| | | Miami, FL 33155 | | | | |
| | | | City/State and Zip Code | | | |
| | | | | | | |
| | | | | ication) | | |
| For further in | nformation co | ncerning this matter, please ca | all: | | | |
| Lucas Perez | | | 786 9914857 at () | | | |
| | Name of | Person | Area Code Daytime | : Telephone Number | | |
| Enclosed is | a check for the | e following amount: | | | | |
| □ \$25.00 F | Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed) | Certificate of Status & | | |
| <u>Ma</u> | iling Address | : , | Street Address: | | | |

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

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

| LU BABY MERCHANDISE, LLO | | | | | | |
|---|----------------------|-----------|--|--------------|-------------------|-------------|
| (Name of the Lim | (A Florida Limited) | Liability | now appears on our records.) Company) | | | |
| The Articles of Organization for this Limited I | Liability Company | were f | iled on SEPTEMBER 02, 202 | 1 a | nd assig | ned |
| lorida document number L21000393497 | · | | | | | |
| This amendment is submitted to amend the fol | lowing: | | | | | |
| a. If amending name, enter the new name | of the limited liab | oility co | mpany here: | | | |
| .UUUUU. LLC | | | | | | |
| he new name must be distinguishable and contain the | words "Limited Liabi | ility Com | pany," the designation "LLC" or the | ne abbreviat | ion "L.L. | C." |
| Inter new principal offices address, if appli | cable: | 1126 | 0 SW 156 CT Miami, F L 3319 | 96 | | |
| <u>Principal office address MUST BE A STRE</u> | ET ADDRESS) | | | | | |
| | | | | - | • | |
| inter new mailing address, if applicable: | | 1126 | 0 SW 156 CT Miami, F l. 3319 | 96 | | |
| Mailing address MAY BE A POST OFFICE | E BOX) | | | | | |
| | | | | | | |
| | | | | | 1311 | |
| 3. If amending the registered agent and/or | | addres | s on our records, <u>enter the r</u> | rame of th | ne new | register |
| gent and/or the new registered office addre | <u>ess here</u> : | | | | (D) . • . • | |
| Name of New Registered Agent: | Lucas Perez | | | ·· | 9 F1 | 1 |
| | 11260 SW 156 | CT | | · | بې | ۲۰۰۰ |
| New Registered Office Address: | 11207 517 150 | | Enter Florida street address | | <u> </u> | |
| | Miami | | , Florida | 33196 | | |
| | | Cit | , 11011d2 | 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 |
|--------------|-------------|--|---------------------------------------|
| MGR | Lucas Perez | 11260 SW 156 CT Miami, FL 33196 | = Add |
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| | | | |
| | | | □Remove |
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| Effective date, if other than the date of filing: [If an effective date is Issted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 Note: If the date inserted in this block does not neet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The 90th day after the date inserted in this block does not neet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The 90th day after the field. | | · | | | | | | | | | | |
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| Effective date, if other than the date of filing: | _ | | | | | | | | | | | |
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| ffective date, if other than the date of filing: | | | | | | | | | | | 65 | |
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