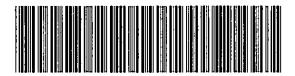


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SECRETARY OF STATE PALLAHASSEFT FLORID.

TEN

•	COVER LETTER	am adding my
TO: Registration Section Division of Corporations	P	arther to LLC,
SUBJECT: LC Baby	ne of Limited Liability Company	am adding my arther to LLC, Managers Obritary Marrero
The enclosed Articles of Amendment and fee(s)	are submitted for filing.	2 meresa varano
Please return all correspondence concerning this	s matter to the following:	
	Brittany Marr	" Thankyou
	Firm/Company	<u>,</u>
776 NI	N 7th DYIVe Address	
Bocar	eaton FL 33486	
LC bak	City/State and Zip Code Clothing Gma address: (to be used for future annual port noti	
For further information concerning this matter,	please call:	
Brittany Marrer	at (501) 287-1 Area Code Daytim	2812 e Telephone Number
Enclosed is a check for the following amount:		
\$\times \$\sum \$\sigma \text{\$\sum \$\sigma \text{\$\sum \$\sigma \text{\$\sum \$\sigma \text{\$\sigma \text{\$\sin \text{\$\sigma		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section	Street Address: Registration Se	ction

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 AMENDMENT TO ARTICLES OF ORGANIZATION OF

0 ~101

LC_BO			
(Name of the Limited Liability Com (A Florida Limite	d Liability Company)	ır records.)	
The Articles of Organization for this Limited Liability Compar Florida document number <u>L 2100040075</u> 5	ny were filed on	9 2 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ability company here:		
The new name must be distinguishable and contain the words "Limited Lia	ibility Company," the designat	ion "LLC" 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)		TOTAL AHASS	
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our record	s, enter the name of the new registe	<u>red</u>
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida stre	vet address	-
		Florida	_
	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 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	meresa Varano	5155 Oak Hill Road	_XAdd
		Delray Bch, FL	□Remove
		33484	□Change
MGR	Brittany Marrero	776 NW 7Th Drive	□Add
	·	Boca Raton, FL	□Remove
		3348U	X Change
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		HASS ASS 	Remove
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rective date, if other the effective date is listed, the effective date inserted in its effective date comment's effective date of	date must be specifi in this block does i	ic and cannot be prior not meet the applica			iling.) Pursuan	
ecord specifies a delayed is filed.	effective date, bu	t not an effective tit	ne, at 12:01 a.m. o	n the earlier of: (b)	The 90th d	ay after the
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red OCTODE	B.7	Mouse of a member or autho	0-	Committee		