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A. BUTLER
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COVER LETTER

TO:		stration Se ion of Cor				
CUDIE		WhattaChar				
SUBJE	CI: _		Name of Lim	ited Liability Company		
The encl	losed a	Articles of .	Amendment and fee(s) are sub	omitted for filing.		
			ndence concerning this matter	•		
			Jennifer Nguyen			
				Name of Person		
			WhattaCharmer			
				Firm/Company		
			2150 NW 76th Terrace			
				Address		
			Margate, FL 33063			
			jennguyen44@gmail.com	City/State and Zip Code		
			E-mail address: (to be used for future annual	report notification	1)
For furth	ner info	ormation co	oncerning this matter, please c	all:		
Jennifer	Nguy	en			4-6693	
		Name of	Person	at () Area Code	Daytime Telep	phone Number
Enclosed	lis a c	heck for th	e following amount:			
■ \$25.	.00 Fil	ing Fec	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is en		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regi	ng Address stration S	Section	<u>Street A</u> Registr	ddress: ration Section	
		sion of Co Box 6327	orporations 7		n of Corporatentre of Tallah	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

j

WhattaCharmer, LLC				
(Name of the Limit	ted Liability Compa	nny as <mark>it now appears on o</mark> Liability Company)	ur records.)	
he Articles of Organization for this Limited L	· · · · ·	21. 1. 9/21/21	Change William	. ,
	iability Company	were filed on <u>2002</u>	and assi	gned
lorida document number 1.21000416410	··			
his amendment is submitted to amend the following	owing:			
. If amending name, enter the new name o	f the limited liab	ility company here:		
he new name must be distinguishable and contain the w	vords "Limited Liabi	lity Company," the designat	ion "LLC" or the abbreviation "L.1	C."
nter new principal offices address, if applic	able:	4613 N University Dr	- 303	
Principal office address MUST BE A STREE	T ADDRESS)	Coral Springs, FL 330	67	
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		4613 N University Dr Coral Springs, FL 330		
. If amending the registered agent and/or regent and/or the new registered office address Name of New Registered Agent:	· ·		s, <u>enter the name of the new</u>	regist
	4613 N Univers	city De 303		
New Registered Office Address:		Enter Florida stre	cet address	
	Coral Springs		, Florida <u>33067</u>	
		City	, FIOTIUA 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 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>	<u>Name</u>	Address	Type of Action
MGR	Jennifer Nguyen	2150 NW 76th Terrace	
		Margate, FL 33063	■Remove
			□Change
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Effectiv	e date, if ot	her than the	date of filin	g:			(optional)	
				decorate has no	for to date of filing of	or more than 90 day iling requiremen	its, this date wi	ll not be listed as
docume	nt's effective	date on the D	epartment of	State's record	ds.			
							, (1) MI - (Mik Jawa Bandha
record d is file	specifies a d	elayed effectiv	re date, but no	t an effective	e time, at 12:01 a.	m. on the earlier	oi: (b) The S	oun day after the
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