## 121000420405

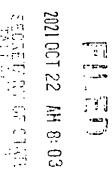
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Q. SILAS				
NOV 03 2021				

Office Use Only



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## **COVER LETTER**

TO: Registration So Division of Cor		,	
subject: <u>Col</u> +	rue Coloring Name of Lim	sited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing	
Please return all correspo	ondence concerning this matter	to the following:	
	Jabaci R Thom	AS-Sone S Name of Person	
	<u>Cultrue</u> Color	Firm/Company	
	1445 NW 1815	Address	
	Miami Gardens F	Z, 33169 City/State and Zip Code	<del> </del>
	Jabar Thomas 7116 E-mail address:	Wahoo.com to be used for future annual report notif	ication)
For further information c	concerning this matter, please c	all:	
Jabari Thomas-Jones Name of Person		at (305) 502-0948 Area Code Daytime Telephone Number	
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	B \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street Address: 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

2021 OCT 22 AM 8: 03

CULTRUE COLORING LLC

OUE MOE COLORING LLC
SECRETARY of After
(Name of the Limited Liability Company as it now appears on over records.) ASSER
9123121
The Articles of Organization for this Limited Liability Company were filed on Golffor Coloring and assigned
<b>7</b>
Torida document number <u>121000420405</u> .
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Culture Colocina 110
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C"
Enter new principal offices address, if applicable:
Principal office address MUST BE A STREET ADDRESS)
Santana and the sant delication of the sant leading
Enter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
3. If amending the registered agent and/or registered office address on our records, enter the name of the new regis
gent and/or the new registered office address here:
Name of New Registered Agent:
N. D. J. JOSEPH J.
New Registered Office Address:  Enter Florida street address
Florida

## 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.

Cin

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Add
			□Remove
		- Autoria - Auto	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<u> </u>
Note	effective date, if other than the date of filing: Oct 15 2021 (optional)  effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 or 16 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
he rec ord is	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the filed.
Date	9 Signature of a member or authorized representative of a member
	9 Alama
	Signature of a member or authorized representative of a member
	Jobasi Thomas-Jones Typed or printed name of signee

Filing Fee: \$25.00