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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Blessed Life Boutique Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Margaret White Name of Person	-
Blessed Life Boutique	-
5427 Mapa Drive	_
Sara Sota, Florida 34243 City/State and Zip Code	-
Margaret @ margaret white Coa Ching J-mail address as be used to future annual report notification)	.com
For further information concerning this matter, please call:	
BJECT: Blessed Life Boutique  Name of Limited Liability Coopsany  Penclosed Articles of Amendment and fee(s) are submitted for filing.  ase return all correspondence concerning this matter to the following:  Margaret Link Name of Person  Blessed Life Boutique Firme Company  5427 Papa Drive Address  San Sota Florida 34243  City/State and Zip Code  Margaret Margaret Link Euse the following annual report notification)  Further information concerning this matter, please call:  Margaret Link Name of Person  Area Code  Daytime Telephone Number  1825.00 Filing Fee Certificate of Status  Certified Copy Certificat copy is enclosed!  S60.00 Filing Fee. Certificat Copy Cer	
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certified (additional copy is enclosed) Certified Copy	ite of Status &

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 OF

Blessed Life Boutique, LLC

( <u>Name of the Limited Liability Comp</u> (A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\bot21000434418$ .	were filed on <u>September 27, a</u>	<u>ാ∂</u> and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company." the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	5427 Napa Drive Sarasota, Florida	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	(Same as above)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		ie of the new registere
Name of New Registered Agent:		,
New Registered Office Address:		· · · ·
	Enter Florida street address	
		-

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) au	thorized to manage, enter the title, name, and address of each person being added
or removed from our records:	
MCR = Managar	Ma

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Change
			□Add
			□Remove
			□Change
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`an effec <u>{ote:</u> - If	the date inserted in thi	must be specific and cannot be prior to a block does not meet the applicable	date of filing or more than 90	(optional) Edays after filing.) Pursuant to 6 nents, this date will not be li	05,0207 ( sted as t
ocumer	it's effective date on th	Department of State's records.			
record Lis filed	specifies a delayed effe l.	ctive date, but not an effective time	e, at 12:01 a.m. on the ear	lier of: (b) The 90th day af	ier the
ated _	april 14	2024	.•		
		Magaut X	Lihite		
		Signature of a member of annorm	zed representative of a memi	ner .	

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