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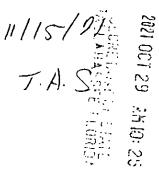
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COVER LETTER

	Registration So Division of Cor			
emp me	7007	I'S FRAGANCE, LLC		
SUBJEC	.l;	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		RAY GONZALEZ ALON	SO	
		· ·	Name of Person	
			Firm/Company	
		10900 SW 196TH ST. AP	Г 308	
			Address	
		CUTLER BAY, FL 33157		
		rayg6768@gmail.com	City/State and Zip Code	
			to be used for future annual report notifi	cation)
For furth	er information c	oncerning this matter, please c	all:	
RAY GO	ONZALEZ ALO	NSO	305 458-4677 at ()	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed	l is a check for th	ne following amount:		
■ \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Sect	tion
	Division of C	orporations	Division of Corp	oorations
	P.O. Box 632 Tallahassee, 1		The Centre of Ta	allahassee Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RAYMAYI'S FRAGANCE, LLC

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000431126</u>	were filed on 10/01/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
RAYMAYI'S FRAGRANCE, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation	'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)		29
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>e</u>	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street aa	Hen
	mar i maa so eer a	
	City	, Florida
New Registered Agent's Signature, if changing Registered Agent:	·	·
I hereby accept the appointment as registered agent and agrephovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as point filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dutic, provided for in Chapter 6	s, and I am familiar with and 05, F.S. Or, if this document is

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>	<u>Address</u>	Type of Action
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			□Remove
			□Change
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