

5/4/22, 3:52 PM

Division of Corporations

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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BOYER LAW FIRM, P.L.
Account Number : I20100000071
Phone : (904)236-5317
Fax Number : (904)371-3935

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

office@boyerlawfirm.com
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TALLAHASSEE
FLORIDA

6:4:4 PM 4-11-2022

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AURA PLANT STUDIO, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

MAY -3 2022

M. SOLOWAY

COVER LETTER

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**TO: Registration Section
Division of Corporations**

SUBJECT: AURA PLANT STUDIO, LLC
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:

Francis M. Boyer, Esq.
Name of Person
Boyer Law Firm, P.L.
Firm/Company
9471 Baymeadows Rd, Suite 406
Address
Jacksonville, FL 32256
City/State and Zip Code
office@boyerlawfirm.com
E-mail address: (to be used for future annual report notification)

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STATE OF FLORIDA
DEPARTMENT OF REVENUE

For further information concerning this matter, please call:

Francis M. Boyer at (904) 236-5317
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 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**

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AURA PLANT STUDIO, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2021-10-06 and assigned Florida document number L21000437322

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

975 McDuff Ave. S.

(Principal office address MUST BE A STREET ADDRESS)

Jacksonville, FL 32205

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street 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 Changing Registered Agent, Signature of New Registered Agent

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CLERK OF COUNTY
JACKSONVILLE, FL

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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>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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