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(Re	questor's Name)	
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## **COVER LETTER**

Ladybee Ent	erprise LLC		
SUBJECT:		ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Betsy Dieujuste		
		Name of Person	<del></del> .
	Lady Bee Connection LLC		
Firm/Company			
1730 S Federal hwy #345			
Address			
	Delray Beach, Florida 3348	83	
		City/State and Zip Code	
	Ladybee305@yahoo.com		
F. 6 d. 1 6		to be used for future annual report notifi	canon)
For further information co	oncerning this matter, please ca		
Betsy Dieujuste		561 789-8258 at ()	
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>

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

( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our reco Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 10-22-21	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
LADY BEE CONNECTION LLC		
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "Ll	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u></u>	SECR.
Enter new mailing address, if applicable:		FIII
(Mailing address MAY BE A POST OFFICE BOX)		- FD
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, ente	
Name of New Registered Agent:		
New Registered Office Address:	E . El . I	
	Enter Florida street addi	ress
	· · · · · · · · · · · · · · · · · · ·	Florida
	City	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

LADYBEE ENTERPRISE LLC

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
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			□Remove
			□Add
			□ Remove
			□Change
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(If an effective do Note: If the	te, if other than the date of filing:	Pursuant to 605.0207 will not be listed as t
the record speci ford is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The	90th day after the
Dated	22	
Dated		
	/ · /	
	Signature of a member or authorized representative of a member	