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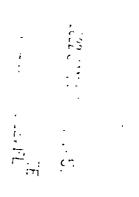
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
<u> </u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiliess Littly Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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A. BUTLER FEB - 8 2022

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tofinity Touch Bout QUE LA (La 1100052186)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Angela T. Lukerson Name of Person
Infinity Touch Boutique uc
3155 Burlington AVEN Apt- 204 3.
St Petersburg Horida, 33713
E-mal address: (to be lised for future annual report notification)
For further information concerning this matter, please call:
Angela 1. Kehlison at (727) 275-2108 Name of Person at (727) Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed) 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

Intinity louch I	outique LLC	
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on ou rida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability Florida document number L2100521130	y Company were filed on 12/69 	2021 and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		···
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe agent and/or the new registered office address here	red office address on our records e:	, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t 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.

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
MEMBEI ANGELA J PETERSON	ANGELA J PETERSON	3155 BURLINGTON AVE N	■ Add
		APT 204	□Remove
		ST PETERSBURG, FL 33713	
		-	□ Add
			□ Remove
			
			□Remove
			□Change
			□Add
		□Remove	
			□Change
			□Add
		-	□Remove
			Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E. Effective date, if other than the date of filing: (If an 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 605.0207 (3)(b. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record 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 record is filed.
Dated Signature of a member or authorized representative of a member
Angela F Pereson Typed or printed name of signee