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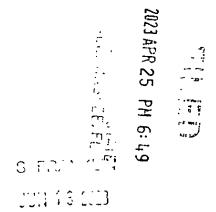
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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# **COVER LETTER**

TO: Registration So Division of Cor		`	
LUVILY, 1	L.C		
SUBJECT:Name of Limited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
	ondence concerning this matter		
	Liz-Aesha Dollisen		
	-	Name of Person	
		Firm/Company	
	4452 NW 185TH STREET	Γ	
		Address	
	MIAMI FLORIDA 33055		
		City/State and Zip Code	
	thesundayc.co@gmail.com		
		to be used for future annual report noti	(fication)
For further information c	oncerning this matter, please co	all:	
Liz-Aesha Dollisen		305 761-5277	
Name o	f Person		ne Telephone Number
Enclosed is a check for the	he 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 S		Street Address: Registration Se	ction
Division of C	Corporations	Division of Cor	
P.O. Box 632		The Centre of T	
Tallahassee, l	FL 32314	2415 N. Monro	e Street. Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

LUVILY. L.L.C			
(Name of the Limi	ted Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)	
The Articles of Organization for this Limited L	iability Company were f	iled on 01/31/2022	and assigned
lorida document number 1.22000052919	·		
this amendment is submitted to amend the following	owing:		
a. If amending name, enter the new name o	of the limited liability co	mpany here:	
THE SUNDAY CLUB CO. LLC			
he new name must be distinguishable and contain the	words "Limited Liability Com	pany," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable: 4452	NW 185TH STREET, MIAM	41 GARDENS FL 33055
Principal office address MUST BE A STREE	ET ADDRESS)		202
			20 1000
Enter new mailing address, if applicable:		NW 185TH STREET, MIAM	II GARDENS FL 33055
Mailing address MAY BE A POST OFFICE	BOX)		711
			339
			- 13 <b>5</b>
<ol> <li>If amending the registered agent and/or gent and/or the new registered office addre</li> </ol>		s on our records, <u>enter the</u>	name of the new registe
Name of New Registered Agent:			
New Registered Office Address:	4452 NW 185TH STR	EET	
	•	Enter Florida street address	
	MIAMI GARDENS	, Florić	ia 33055
	Cia		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

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
			□ Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			🗆 Add
			□Remove
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			□Change
			□Remove
			Change

# Page 2 of 3

it amending any other informat	ition, enter change(s) here: (Attach additional sheets, if necessary.)
·	
-	
<del>-</del>	
-	<del></del>
Effective date, if other than the If an effective date is listed, the date must Note: If the date inserted in this blodocument's effective date on the De	st be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 lock does not meet the applicable statutory filing requirements, this date will not be listed as
ne record specifies a delayed The 90th day after the reco	d effective date, but not an effective time, at 12:01 a.m. on the earlier or ord is filed.
Dated	11:22 AM
	Signature of a member or authorized representative of a member
Liz-Aesha Dollisen	
	Typed or printed name of signee

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