

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

L2200019768

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000019768 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC

Account Number : 120220000070

Phone : (888)462-3453

Fax Number : (877)919-2613

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

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MEDUSAS SECRET GARDEN LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
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Electronic Filing Menu

Corporate Filing Menu

Help T. LEMIEUX

JAN 19 2023

COVER LETTER

(((H23000019768 3)))

TO: Registration Section
Division of Corporations

SUBJECT: MEDUSAS SECRET GARDEN 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:

LOVETIE DOBSON

Name of Person

Firm/Company

17350 STATE HWY 249, #220

Address

EFILE1234@INCFLE.COMHOUSTON, TX, 77064

City/State and Zip Code

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

EFILE1234@INCFLE.COM

8884623453

Name of Person

at ()

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

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ARTICLES OF AMENDMENT (((H23000019768 3))) TO ARTICLES OF ORGANIZATION OF

MEDUSAS SECRET GARDEN 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 04/21/2022 and assigned
Florida document number 122000191196

This amendment is submitted to amend the following:

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

BRITTANY ESTELLE LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

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:

REPUBLIC REGISTERED AGENT LLC

New Registered Office Address:

1150 Nw 72nd Ave Tower 1 Ste 455

Enter Florida street address

Miami

Florida

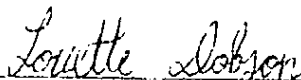
33126

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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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
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_____	_____	_____	☐ Add
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		_____	☐ Add
		_____	☐ Remove
		_____	☐ Change
_____	_____	_____	☐ Add
		_____	☐ Remove
		_____	☐ Change

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[The page contains faint horizontal lines, suggesting it was part of a lined document or notebook.]

(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)

Dated January 16, 2023

Signature of a member or authorized representative of a member

Typed or printed name of signee