L22000214972

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2022 AUG - 1 PM 2:37 SECRETARY OF STATE

COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations					
OUDLESTE	ENVAGLE USA LLC						
SUBJECT:Name of Limited Liability Company							
674 ·							
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	ondence concerning this matter	to the following:				
		Swati Gupta					
			Name of Person				
		TOZAD USA LLC					
	Firm/Company						
	3605 Silvery Ln						
		 	Address				
		Jacksonville/Florida 32217	7				
			City/State and Zip Code				
		tozadbeauty@gmail.com	to be used for future annual report no				
For further in	nformation c	oncerning this matter, please c	•	outreation)			
Swati Gupta			225 933-0722				
· · ·	Yama n	f Person	at () Area Code Dayti	ine Telephone Number			
	,vame o	reson	Area Code Dayu	me reiephone Number			
Enclosed is a	check for th	ne following amount:					
□ \$25.00 F	iling 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:		Street Address:					
Registration Section Division of Corporations			Registration Section Division of Corporations				
P.O. Box 6327			The Centre of Tallahassee				
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 AUG - 1 PM 2: 37

ENVAGLE USA LLC

company has been notified in writing of this change.

SECRETARY OF STATE TALLAHASSEE. FL

(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 I	Liability Company	were filed on $\frac{05/06}{}$	2022 and	assigned
Florida document number L22000214972	·			
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited liab	oility company here:		
TOZAD USA LLC				
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the desig	nation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if appli	3605 Silvery Ln Jac	ksonville, FL, 32217		
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address if applicables		3605 Silvery Ln Jac	ksonville, Fl. 32217	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
graining addition MATE DE .TT ONE TANTITUE	<u> </u>			
B. If amending the registered agent and/or agent and/or the new registered office addresses		address on our reco	rds, enter the name of the	new registered
- Letter and the new register to write address	LOG ILCI C			
Name of New Registered Agent:	Swati Gupta			
New Registered Office Address:	3605 Silvery L	n		
	Enter Florida street address			
	Jacksonville		, Florida 32217 Zip Co	
		City	Zip Co	xle
New Registered Agent's Signature, if changing	Registered Agent:	L		
I hereby accept the appointment as register provisions of all statutes relative to the proj	•	•		

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

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
			[] Change
			□Adđ
			□Remove
			□ Change
		·	DAdd
			□Remove
			Change
			🗆 Add
			🗆 Remove
			[] Change

Typed or printed name of signee

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)