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(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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A. BUTLER JUN 0 6 2022

COVER LETTER

LASIO PR SUBJECT:	OFESSIONAL PRODUCTS L	LC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Richard Sierra, Esq.		
		Name of Person	
	Richard Sierra &Associate	es, PA	
	-	Firm/Company	
	6501 Congress Ave. #240		
		Address	
	Boca Raton, FL 33487		
		City/State and Zip Code	
	info@businesslawyer.biz		
	E-mail address! (to be used for future annual report notil	fication)
For further information c	concerning this matter, please c	all:	
Richard Sierra, Esq.		954 757-1919	
Name o	rf Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

TO:

Registration Section **Division of Corporations**

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 FILED **OF**

2022 JUL -6 PM 1:59

LASIO PROFESSIONAL PRODUCTS LLC

(Name of the Limited Liability Company as it now appears on our records) A COF STATE (A Florida Limited Liability Company) TALL AMASSEE, FL TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company	were filed on June 6,	2022	_ and assigned
Florida document number 1.22000259134			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designa	ation "I.I.C" or the abbr	eviation "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)	<u>.</u>	· · · · · · · · · · · · · · · · · · ·	
			
B. If amending the registered agent and/or registered office a	ddress on our record	ds, <u>enter the name</u>	of the new registered
agent and/or the new registered office address here:			
Name of New Registered Agent:			
Name of New Acgistered Agent.			
New Registered Office Address:			
	Enter Florida so	reet address	
		. Florida	
	City	Florida	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 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>	<u>Address</u>	Type of Action
AMBR	Nadine N. Ramos	1756 BUSINESS CENTER LANE	□Add
		KISSIMMEE, FL 34758	□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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Effective date, if other than the date of filing: July 5, 2022			
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Filing Fee: \$25.00