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(City/State/Zip/Phone #)				
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COVER LETTER

TO: Registration Section

Division of Co	rporations		
	Culture LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Nichole Brown		
	-	Name of Person	
	Locs Love & Culture LLC		
		Firm/Company	
	4355 Song Sparrow Drive		
Firm/Company 4355 Song Sparrow Drive Address Middleburg, FL 32068 City/State and Zip Code locsloveculture@gmail.com E-mail address: (to be used for future annual report notification)			
	Middleburg, FL 32068		
	_		
		·	ification)
For further information (concerning this matter, please c	all:	
Nichole Brown		904 599-7794 at ()	
Name	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	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 Addre Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co. The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Locs Love Culture LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned 😂 L22000264035 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Locs Love & Culture LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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:

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida

Zip Cock

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 = N $AMBR = A$	lanager Authorized Member		
Title	<u>Name</u>	Address	Type of Action
			DAdd
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Note: 11	e date, if other than the date of filing:	0207 (3 d as the
d is filed	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 2022
rd is filed	· · · · · · · · · · · · · · · · · · ·	the 2022 JUL
e record : rd is filed Dated		2022 JUL 15 AM