L22000311314

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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Be There Yo	oga LLC	
Sobster.	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:	
	St	phanie M. Miller Name of Person	
	B.	e There Yoga U	-C
	13444 Gra	n Bay Pkuy. Apt. 1	201
	Jack	sonville, FL 3225 City/State and Zip Code	8 PH 4: 0
	Conta	Ct. bethere yoga @ co	mail.com
		•	tation) ; ¿ ω ;
	oncerning this matter, please c		
Stephan Name o	vie M. Miller of Person	at (<u>904</u>) <u>310 -</u> Area Code Daytime	8/85 Carried C
Enclosed is a check for t	he following amount:		
S25.00 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 Addres Registration		Street Address: Registration Sect	ion
Division of C	Corporations	Division of Corp	orations
P.O. Box 632		The Centre of Ta	
Tallahassee,	rl 32314	2415 N. Monroe	Succe, Suite 610

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Be Th	iere Yoga LLC
(Name of the Limited Liab) (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number <u>L220003113</u> This amendment is submitted to amend the following:	Company were filed on <u>July 13, 2022</u> and assigned <u>1</u> 4
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Li	mited 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 ADD	13444 Gran Bay Pkwy. Apt. 1201 Jackson Ville, FL 32258
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13444 Gran Bay Pkwy. Apt. 1201 Jacksonville, FL 32258
B. If amending the registered agent and/or register agent and/or the new registered office address here	ed office address on our records, <u>enter the name of the new registered</u> :
Name of New Registered Agent:	
New Registered Office Address:	13444 Gran Bay PKwy. Apt. 1201 Enter Morida street address
• 	Tacksonville, Florida 32258 City Zip Code
New Registered Agent's Signature, if changing Register	red Agent:
provisions of all statutes relative to the proper and accept the obligations of my position as registered	t and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and agent as provided for in Chapter 605, F.S. Or, if this document is red 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
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			□Remove
			□Change
			□Add
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an effective Note: If the	re date is listed, the da he date inserted in	ate must be specific at this block does not the Department of	nd cannot be prior to meet the applical		re than 90 days after	filing.) Pursuant to	
record spe l is filed.	occifics a delayed c	effective date, but no	ot an effective tim	ne, at 12;01 a.m. oi	the earlier of: (b	The 90th day	after the
ated <i>1</i>	February	· 17th	2023			2023 FEB 23	المراجع
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		Signature of a	a member of author	ized representative of	ra member	: w	2
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