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(((H22000327644 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

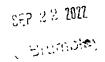
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OCEAN BREEZE CANDLES LLC

Certificate of Status	0
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Help



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OCEAN BREEZE CANDLES 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 09/06/22	and assigned
Florida document number L22000388153		
rionga document namoer		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
365 luxury burn LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the ab	breviation "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 agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter Florida street address	Z0ZZ SEP 2 PM
	, Florida	Tip Code
New Registered Agent's Signature, if changing Registered Agent	·	· 20
I hereby accept the appointment as registered agent and ag- provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am f provided for in Chapter 605, F.S. Or.	amiliar with and if this document is
If Cha	inging Registered Agent, Signature of New Res	gistered 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
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Tective date, if other than the date in effective date is listed, the date must be some. If the date inserted in this block comment's effective date on the Depart	loes not meet the applicabl	late of filing or more than 90 e statutory filing requirem	(optional) days after filing.) Pursuant to ents, this date will not be) 605.020 : listed a
ecord specifies a delayed effective dat is filed.	e, but not an effective time	, at 12:01 a.m. on the earl	ier of: (b) The 90th day	after the
September 21	2022			
	ature of a member or authoriz			

. . . .

Filing Fee: \$25.00