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Y. SCOTT AUG 1 9 2023

## COVER LETTER

TO: Registration Sec Division of Corp			•		
SUBJECT:	Glitter Ga	Mera LLC	•	•	
SOBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.			
	dence concerning this matter				
	Hanh	Name of Person		-	
	Glitter	Gallery LC Firm/Company)		<b>2023</b> SEC TE	
	406001D M		2L W.	JUL 27 RETAGE	
	Jacksonvill	11 FL 32277 City/State and Zip Code Ser 3979 Q	}	JUL 27 PM 3: 00 RETALLY OF STATE LLANASCEE, FT S	T O
	E-mail address: (	to be used for future annual report in	wification)	11	
For further information co	ncerning this matter, please ca	· · · · · · -	1		
Hanh the	Person	$\frac{1}{\text{Area Code}} \frac{134}{\text{Days}}$	time Telephone Number	<del>.</del>	
Enclosed is a check for the ∠ \$25.00 Filing Fee	following amount:  \$\sum \frac{1}{2} \frac{5}{3}0.00 \text{ Filing Fee & Certificate of Status}	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
Mailing Address: Registration So Division of Co P.O. Box 6327	ection rporations	Street Address: Registration S Division of C The Centre of	Section Torporations t`Tallahassee		
Tallahassee, Fl	L 52314	2415 N. Mon	roe Street, Suite 8	10	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLitter Gall	iery LLC	
(Name of the Limited Liability Compan (A Florida Limited L	ny as it now appears on our records.) Dability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number  124 - 100	04/25/2022	
A. If amending name, enter the new name of the limited liabil	ility company here:	
The new name must be distinguishable and contain the words "Limited Liability Liabilit	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	4066 OID MILL COVE TRL	
(Principal office address MUST BE A STREET ADDRESS)	Jack-sonville, FL 32277	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	address on our records, enter the name of the new registere	<u>d</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
Name Description of A. and A.	City Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is	,

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>	Name	Address	Type of Action
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n effective d <u>te:</u> If the o	ate is listed, the d date inserted in	an the date of fill date must be specific a this block does no	and cannot it meet the	e applicable st	of filing or more atutory filing r	than 90 days	optional) after filing. , this date	) Pursuan will not	it to 605.02t be listed a
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cord speci is filed.	fies a delayed e	effective date, but r	iot an effe	ective time, at	12:01 a.m. on	the earlier o	f: (b) Th	e 90th d	ay after the
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Filing Fee: \$25.00