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COVER LETTER

Division of Corporations	
SUBJECT: Angelic Threads LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Estrella Rosa-Harrison Name of Person	_
Firm/Company	_
2890 SW 173 rd St. Rd.	
Ocala, Florida 34473 City/State and Zip Code estrella, whave ison 6 amail com E-mail address: (to be used for future annual report notification)	— ::
E-mail address: (to be used for future annual report notification)	- r · · · c
For further information concerning this matter, please call:	
Estrella Rosa-Harrison at (352) 362-9511 Name of Person Area Code Daytime Telephone Num	ıbeı
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certificate of Status	Filing Fee, icate of Status & ied Copy is enclosed)
Mailing Address: Street Address:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

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 OF

Appolic thank 110

Name of the Limited Liability Com (A Florida Limite	pany as it now appears or d Liability Company)	our records.)
The Articles of Organization for this Limited Liability Compar Florida document number <u>La 200 0411609</u>	ny were filed on <u>Ser</u>	otember 21, 2003 d assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
Looks by Estrella L	LC	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		-
		2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		63
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 agent and/or the new registered office address here:	e address on our reco	rds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	· - ·····	
	Enter Florida .	street address
	(716)	, Florida Zip Code
	Ciţv	гір Сойе

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
			□Add
			□Change
			JAdd
			□Remove
			□Change
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			□Change
			□Add
			□Remove
			. T.Changa

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (37b). Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated March 17 Estable Mana-Hurrison
Signature of a member or authorized representative of a member

Estrella Rosa-Harrison
Typed or printed name of signee