8/9/23, 11:56 AM Division of Corporation

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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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 : (813)436-5206

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

Email Address:\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LUSH FANTASY LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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AUG 10 2023

Electronic Filing Menu Corporate Filing Menu

T. LEMÜÜK

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lush Fantasy LLC	•	
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)	<del></del>
The Articles of Organization for this Limited Liability Company were f Florida document number L23000149346		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability co	mpany here:	
The new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abbrevi	ation "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 address agent and/or the new registered office address here:	s on our records, <u>enter the name of</u>	the new registered
Name of New Registered Agent:		
New Registered Office Address:		·Δ
The regimeted of the regimes.	Enter Florida street address	,
	, Florida	ယ္
Си		ip Code
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## 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.

8/9/2023 09:00:28 PDT \*

To: 18506176383

Page 3/4

From: Registered Agents Inc

Fax: 813436

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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		Tampa, FL 33624	□Remove
			Change
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To 18506176383

From: Registered Agents Inc.

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record specifies a delayed effecti Lis filed.	ve date, but not	t an effective ti	me, at 12:01 a.n	n, on the earlier of: (b)	The 90th day after	the
ated August 9th		2023				
August 9th						
しょくかんりん カスコージャック	マスタン こうしょう					

Typed or printed name of signee