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COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor		,	
SUBJECT: The	Do Ilhouse Name of Lim	Luxuries LL (ited Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	TIFFANY	Nicole Patter Name of Person	SON
		Firm/Company	
	3748 Verde	Gardens Circle	
		e, F1. 32218. City/State and Zip Code	
	E-mail address: (ayhouse 81 @ g m to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please co	ıll:	
TIFFANY Name o	Patterson Person	at (904) 403 Area Code Daytime	R - D 6 8 S Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	S30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration 9 Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Corp The Centre of Ta	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Dollhouse Luxu (Name of the Limited Liability Compar (A Florida Limited Liability Compar)	aries LLC ny as it now appears on our records.) hability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 24 00000 6 3 7 3</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	
The new name must be distinguishable and contain the words "Limited Liability Inches the Contain the Words" in the Contain the Words "Limited Liability Inches the Contain the Words" in the Contain the Words "Limited Liability Inches the Contain the Words" in the Contain the Words "Limited Liability Inches the Contain the Words" in the Contain the Words "Limited Liability Inches the Contain the Words" in the Contain the Words "Limited Liability Inches the Contain the Words" in the Words "Limited Liability Inches the Contain the Words" in the Words "Limited Liability Inches the Contain the Words" in the Words "Limited Liability Inches the Contain the Words" in the Words "Limited Liability Inches the Contain the Words" in the Words "Limited Liability Inches the Contain the Words" in the Words "Limited Liability Inches the Contain the Words" in the Words "Limited Liability Inches the Contain the Words" in the Words "Limited Liability Inches the Contain the Words" in the Words "Limited Liability Inches the Contain the Words" in the Words "Liability Inches the Contain the Contain the Words" in the Words "Liability Inches the Contain the Contain the Words" in the Words "Liability Inches the Contain the Words" in the Words "Liability Inches the Contain the Contain the Words "Liability Inches the Contain the Contain the Contain the Words "Liability Inches the Contain the C	ity Company," the designation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	3748 Verde Chardens Circle Jacksonville, Florida 32218
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	-
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	ony tap cone

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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
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an effe	ctive date is	listed, the dat	e must be spec	citic and o	cannot be p	rior to date	of filing or a	nore than 90	days after the	iling.) Pursu date will n	ant to 605.0207 of be listed as
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record is file		delayed eff	fective date, l	but not a	ın effectiv	e time, at	12:01 a.m.	on the ear	lier of: (b)	The 90th	day after the
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