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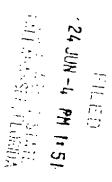
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## COVER LETTER

Registration Section

**Division of Corporations** 

TO:

SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Mary A Cordero		
		Name of Person	
	The Lion & The Lamb Em	broidery LLC	
		Firm/Company	
	5261 Juliet Court		
		Address	<del>.</del>
	Ave Maria F1, 34142		
		City/State and Zip Code	·
		dthelambembroidery@gmail.com	
	E-mail address: (	to be used for future annual report not	tification)
For further information c	oncerning this matter, please c	all:	
Mary A Cordero		239 658-5218 at ( )	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration		Street Address: Registration Se	ection
Registration Section Division of Corporations		Division of Co	
P.O. Box 6327		The Centre of	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Lion & The Lamb Embroidery LLC		
( <u>Name of the Limited Liability Compan</u> (A Florida Limited L	y as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company ν	were filed on 5/13/24	and assigned
Florida document number 1.24000220622		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LI.C" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		24
		<u> </u>
Enter new mailing address, if applicable:		7
Mailing address MAY BE A POST OFFICE BOX)		7 (A)
maning address MATI BETTI OST OFFICE DOTY		<u> </u>
		<del>- 3**</del>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the r</u>	name of the new regi
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	Zip Code

#### 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>	Address	Type of Action
Manager	Mary A Cordero	5261 Juliet Court	■Add
		Ave Maria FL 34142	□ Remove
			□ Change
AR Liam A. Cordero	Liam A. Cordero	5261 Juliet Court	□ Add
		Ave Maria FL 34142	= Remove
			Change
			Remove
			Change
			🗀 Add
			□ Remove
			Change
			☐ Change
			□Add

11 4411	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) EIN #99-3106797
(If an e	effective date, if other than the date of filing:
ne rec	ord 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 filed.
Date	d
	Many a Cordero  Mary A Cordero
	Mary A Cordero  Typed or printed name of signee