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COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
SUBJECT:	<u>m Shanti Mindf</u> Name of Lim	ullness LLC	
	Name of Em	ned Diability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u>Jackelyn</u>	Sanz- Arraez Name of Person	
		Firm/Company	
	3721 SW	60th Ave AP+4 Address	
	Davie FL	33314 City/State and Zip Code	
	<u>Jacky Sariz 64 e</u> E-mail address: (i	<i>yahoo com</i> to be used for future annual report notifi	cation)
For further information c	concerning this matter, please co	all:	SSEE SEE
Jackelyn Say	72 · Árraez i Person	at (<u>959</u>) <u>65み</u> Area Code Daytime	8773 Filephone Number 6
Enclosed is a check for the	he 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 Address Registration S Division of C	Section	Street Address: Registration Sec Division of Corp	
P.O. Box 632		The Centre of Ta	ıllahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compan</u> (A Florida Limited Lia	SS <u>LLC</u> y as it now appears on our records.)			
(A Florida Limited Lia	ability Company)			
The Articles of Organization for this Limited Liability Company w	vere filed on <u>JUNE 28, 203</u>	ાવ	and ass	signed
Florida document number <u>L24000290458</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ity company here:			
Om Shanti Mind Fulness LL The new name must be distinguishable and contain the words "Limited Liability	C y Company," the designation "LLC" or t	he abbres	riation "L	.L.C."
Enter new principal offices address, if applicable:	3721 SW 60th AVE	. Dav	ie FL	APTY
(Principal office address MUST BE A STREET ADDRESS)	33314			
Enter new mailing address, if applicable:	3721 SW 60+h Ave,	Douk	e FL,	AP+4
(Mailing address MAY BE A POST OFFICE BOX)	33314			
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our records, <u>enter the</u>	name of	f the nev	w registered
Name of New Registered Agent:				
New Registered Office Address:		•		
	Enter Florida street address	7.5.7. 7.5.7.		,
	, Florid Cuy	* (S) (S)	Zip <u>Co</u> de	_
New Registered Agent's Signature, if changing Registered Agent:		mon.	1112	٠.،
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 a company has been notified in writing of this change.	erformance of my duties, and 1 ovided for in Chapter 605, F.S.	am¶åm. Or, if ti	ill ar wii his doci	th and iment is

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	<u>Address</u>	Type of Action
AMBR	Jackelyn Sanz-Arraez	3721 Sw 60+h Ave, Davie FL 33314	□Add
		AP+ 4_	□Remove
			□Add
			□Remove
			□Change
			□Add
			F⊃ □Remove
			Change
			DH Add]
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	SSC	- 627
	THU:	N 12
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 tote: If the date inserted in this block does not meet the applicable statutory filing requires ocument's effective date on the Department of State's records.	ילים (optional) 0 days after filing.) Pursu ments, this date will n	onant to 605.02
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear d is filed.	rlier of: (b) The 90th	day after th
July 1st. 2024. Jackelyn Jan - Access Suprature of a member or authorized representative of a member of printed name of signee		

Filing Fee: \$25.00