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COVER LETTER

TO:

TO:	Registration Section Division of Corporations
eun u	T: JOURNEY TO LOVE LLC
SORT	Name of Limited Liability Company
The en	osed Articles of Amendment and fee(s) are submitted for filing.
Please	eturn all correspondence concerning this matter to the following:
	TINA GRELLO OR JANET IMPASTATO Name of Person
	JOHRNEY TO LOVE LLC Firm/Company
	1975 WESTLAND RD
	Address
	MOUNT DORA FL 32757
	Chyrotic and Zip Code
	E-mail address: (to be used for future annual report notification)
For fu	ner information concerning this matter, please call:
	ANET IMPASTATO 11 (727) 270 - 3333
	Name of Person at (727) 270 - 3333 Name of Person Area Code Daytime Telephone Number
Enclos	d is a check for the following amount:
S \$2	.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee, Certificate of Status \$\Certified Copy & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

JOHENEY TO LOW	E, LLC	2024 SEP 17 PM 2: 40	
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now a	many)	
		MALLAHARRED VIME	
The Articles of Organization for this Limited Liability	Company were filed of	on 7-5 2024 and assigned	
Florida document number _ L 24000 3022	82		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability compa	any here:	
The new name must be distinguishable and contain the words "l	Limited Liability Company,	"the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	. 		
D. If any discrete maintained and and the maintain			
B. If amending the registered agent and/or registered agent and/or the new registered office address her		our records, enter the name of the new register	<u>.ea</u>
Name of New Registered Agent:	· · ·		
New Registered Office Address:			
	En	nter Florida street address	
		Florida	
	Cuy	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
MGL	TINA GRELLO	1975 WESTLAND RD	\black dd
		MOUNT DO RA FL 32757	□Remove
			□Change
MBR	JANET IMPASTATO	1975 WESTLAND RA	□Add
		MOUNT DORA FL 32757	🗆 Remove
			Dechange
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			Remove
			□Change

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m effective d ote: If the	te, if other than the date is listed, the date in date in this effective date on the	nust be specific and block does not r	d cannot be prior meet the applica			after filing.) Pur	
ecord speci is filed.	ifies a delayed effect	ive date, but not	t an effective ti	me, at 12:01 a.m	on the earlier o	of: (b) The 90	th day after the
ned <u>S</u> E	PTEMBER	13	. 2024	·			
	Ct D	#		orized representativ			
				 ,			
_		Signature of a	member or autho	orized representativ	e of a member		