(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only

G. MCLEOD

MAY 29 2012

EXAMINER



200235055122

05/23/12--01008--002 **25.00

PM 3: 05

COVER LETTER

TO: Registration S Division of Co		, •				
SUBJECT:	HELENE	BOUTIQUE LLC				
	Name of Lim	ited Liability Company				
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.				
Please return all corresp	ondence concerning this matte	r to the following:				
	<u></u>	LUIS R.SMITH				
		Name of Person				
JESSEL INVESTMENS LLC						
Firm/Company						
11402 NW 41ST STREET SUITE 211						
Address						
DORAL , FL 33178						
		City/State and Zip Code				
	E-mail address: (to be used for future annual report noti	fication)			
For further information	concerning this matter, please	call:				
LU	IIS R. SMITH	at (305)	470-2429			
Name of Person		Area Code & Daytin	ne Telephone Number			
Enclosed is a check for t	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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	LENE BOUTIQUE LLC	and and and and a	<u>.</u>		
(Name of the Limited)	Liability Company as it now appear Florida Limited Liability Company)	s on our records.)			
The Articles of Organization for this Limited Lia	ability Company were filed on	12/06/2010	and assigned		
Florida document numberL10000125	087				
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liability company here	<u>2</u> :			
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	ny," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if applica	ble:				
(Principal office address MUST BE A STREET		<u> </u>			
		. In	3 3		
Enter new mailing address, if applicable:			725		
Mailing address MAY BE A POST OFFICE B	30X)	÷ .			
		P. A.			
			ဟ		
B. If amending the registered agent and/or registered agent and/or the new registered off		ur records, <u>enter th</u>	e name of the new		
Name of New Registered Agent:	HELENE JOASIL				
New Registered Office Address: 130 N MIAMI AVE Enter Florida street address					
	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 608, 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member Type of Action <u>Title</u> <u>Name</u> <u>Address</u> MGR **KENNY JOASIL** 130 N MIAMI AVE MIAMI FL. 33128 ☐ Add ✓ Remove HELENE JOASIL MGR ✓ Add 130 N MIAMI AVE MIAMI FL, 33128 Remove ☐ Add Remove Remove \square Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MAY, 17 2012 Dated ___ or authorized representative of a member **HELENE JOASIL**

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee