# 11000106949

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T. HAMPTON

EXAMINER

## **COVER LETTER**

TO: Registration Se Division of Cor	
SUBJECT: FAV)	c-toes by Selena
•	Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ndence concerning this matter to the following:
	Selena Cheney Name of Person
	- faux-toes by Sefera LLC. Firm/Company
ended to	3314 Worthside Dr #18A
nevaphohyraphy	Setena chency a gmail com  E-mail address: (to be used for future annual report notification)
For further information c	oncerning this matter, please call:
Jelena Name o	cheney at 305, 587 - 7335  Area Code & Daytime Telephone Number
Enclosed is a check for the	se following amount:
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  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

- Faux - toes by	Selena LLC			
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) lability Company)			
The Articles of Organization for this Limited Liability Company	were filed on	Frand sessigned		
Florida document number <u>L 11000106949</u> .		23 23 23		
This amendment is submitted to amend the following:		PM 12: 1		
A. If amending name, enter the new name of the limited liab	ility company here:	PROS 05		
Selena Eva photography L	LC.	>		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation	"LLC" or the abbreviation		
Enter new principal offices address, if applicable:	3314 Northside	Dr#181		
(Principal office address MUST BE A STREET ADDRESS)	Key West FL	33040		
Enter new mailing address, if applicable:	3314 Novthside	DY #18A		
(Mailing address MAY BE A POST OFFICE BOX)	KEY WEST FL	27040		
B. If amending the registered agent and/or registered of		r the name of the new		
registered agent and/or the new registered office address her	<u>e</u> :			
Name of New Registered Agent: Selen	a cheney			
New Registered Office Address: 3314 N	bythside Br #18	A		
Enter Florida street address				
Keyh	UST, Florida	33040		
J	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, thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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 **Title** Name Address **Type of Action** Remove ☐ Add ☐ Remove Add Remove  $\prod Add$ ☐Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) member Typed or printed name of signee

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Filing Fee: \$25.00