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Certified Copies	Certificate	s of Status
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COVER LETTER

	Registration Se Division of Cor		•	
	Occasion A	II, LLC		
SUBJEC	::	Name of Lin	nited Liability Company	_
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	indence concerning this matter	to the following:	
		Franchesca Alicea		
			Name of Person	
			Firm/Company	
		3105 Johns Pkwy		21 H
			Address	
		Clearwater, FL 33759		N 19 PH
		info@fiercefancy.com	City/State and Zip Code	2021 JAN 19 PH 2: 06 SECRETATION OF STATE SECRETATI
For furth	er information c	E-mail address: ((to be used for future annual report notification)	
	sca Alicea	oncerning and matter, prease e	813 803-0178	
	Name o	f Person	Area Code Daytime Telephone Nur	nber
Enclosed	is a check for the	ne following amount:		
□ \$25.0	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	0 Filing Fee, ficate of Status & fied Copy ional copy is enclosed)
	Mailing Addres Registration 5		Street Address: Registration Section	
	Division of C	Corporations	Division of Corporations	
	P.O. Box 632 Tallahassee, l		The Centre of Tallahassee 2415 N. Monroe Street, Suit	e 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Occasion All, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our record- nited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Comp.	pany were filed on 2/5/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Fierce & Fancy, LLC		
The new name must be distinguishable and contain the words "Limited I Enter new principal offices address, if applicable:	Liability Company," the designation "LLC"	2021 SEEC
Principal office address MUST BE A STREET ADDRESS	<u> </u>	III E II
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		LED 19 PH 2 06 SSEE/FL
3. If amending the registered agent and/or registered off gent and/or the new registered office address here:	fice address on our records, <u>enter</u>	the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	s
	ru.	. u.t.d
	, F16	orida

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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Franchesca Alicea	3105 Johns Pkwy	
		Clearwater, FL 33759	□Remove
			■ Change
AMBR	Adriana V. Renteria	20501 Grand Vista Lane	Add
		Tampa, FL 33647	🗀 Remove
			□Change
			2021QAN
			GRemove GOOD P
			Change Pachange Change
			□Remove
			□Change
			
			□Remove
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Tective date, if other than the neffective date is listed, the date muster. If the date inserted in this becament's effective date on the E	st be specific and d lock does not mi	cannot be prior t eet the applica		more than 90 days:			
ecord specifies a delayed effective is filed.	e date, but not a	an effective tin	ne, at 12:01 a.n	n. on the earlier of	f: (b) The 90	th day afte	er the
January 11	,	2021					
		Translava (Vien				
	, ,						

Filing Fee: \$25.00