119000 283 630

(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



200338938822

01/09/20--01008--022 **25.00

2020 JAN -9 PH 2: 48
SEDRALL SATATE
FL

SIMMONS
 FEB 05 2020

COVER LETTER

PO: Registration Section Division of Corpor		,	
SUBJECT: X/05	et Vege Fas Name of Limit	LION BOUTIQUE ed Liability Company	"110"
The enclosed Articles of Am	endment and fee(s) are subm	nitted for filing.	
Please return all corresponde	nce concerning this matter to	o the following:	
	Rhinner	Ka V Mathus Name of Person	<u>-</u>
	Kloset Urge	Fashin Bouty	uc uc
	27/0 Somer	Set De apt X 311	<u> </u>
	Lauderdale	Lakes K4, 333/	1/
		be used for future annual report notifica	ation)
For further information conce	erning this matter, please cal	t:	
<u> Khon næka</u> Name of Per	son Lathis	at (<u>567)</u> <u>332-7</u> Area Code Daytime T	Clephone Number
Enclosed is a check for the fo	ollowing 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 Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kloset Urgo rasmon Boutique LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on $11/14/2019$ and assigned Florida document number $11/9000283030$.	I
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."	-
Enter new principal offices address, if applicable: 2710 Someset De Unit X3	<u> 11</u>
(Principal office address MUST BE A STREET ADDRESS) Lauderdale Lakes H, 3331	<u>/_</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered office address on our records, enter the name of the wew registered agent and/or the new registered office address here:	stered
Name of New Registered Agent: Change Hattus New Registered Office Address: (023 NW) S way Decktored Enter Florida street address	7 }
Enter Florida street address Deer few Beach U Florida 33441/ 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 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, 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
MGR	Rhonneka Mathis	623 NW 1 St Way Deer Field	NZAdd
		Beach 4 33441	□Remove
			□Change
			□Add
			□Remove
			Change
		SECRE AND ADDRESS OF TAIL AND ADDRESS OF TAIL AND ADDRESS OF TAIL ADDRESS OF T	[Stemove]
			i Changemen
			□Change
			🗀 Add
			□Remove
		····	□Change
			□Add
			□Remove
			DChange

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
Hello I'm the owner of the company	
and lunged like to add muself as	
the Huthorized Person having hanking	
1600 Degalised is as in the last of	
Isues becouse / wasn + awake that I was	
supposed to add myself when I applied for	
the lie.	
\$1. 20	
20 J	
278 9	
m ···	
E. Effective date, if other than the date of filing: 11 14 2019. (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a document's effective date on the Department of State's records.	(3)(b) he
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.	
Dated 01/03/2020	
Signature of a member or authorized representative of a member	
Lhonneka Mattis	

Filing Fee: \$25.00