123000481699

(Requestor's Name)
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12/14/23

COVER LETTER

Division of Cor	porations				
SUBJECT:	Desso-Designs L1	.C			
		aited Liability Company	-	_	
The enclosed Articles of a	Amendment and fee(s) are sub	omitted for filing.			
	ndence concerning this matter	-			
rease return an correspo	ndence concerning this matter	to the following,			
	Filing Angela				
		Name of Person		_	
	ZenBusiness, Inc	-			
		Firm/Company		_	
	336 E. College Av	e., Suite 301			
		Address			
	Tallahassee, Fl				
		City/State and Zip Code			
	ra@zenbusiness.cor E-mail address: (n to be used for future annual re	eport notification)	_	
For further information co	oncerning this matter, please c	all:			
Filing Angela		at (<u>844</u>)	493-6249	~ .	
Name of	Person	Area Code	493-6249 Daytime Telephone Num	aber	
					+ ‡
Enclosed is a check for th	e following amount:			-1	• '
S \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certif (sed) Certif	Filing Fee. The icate of Status & icate of Statu	

TO:

Registration Section

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

Desso-Designs LLC				
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany <u>as it now appear</u> ed Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Compa	nny were filed on	10/20/2023	and assig	gned
Florida document number <u>L23000481699</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited li	iability company ho	ere:		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the d	esignation "LLC" or the	abbreviation "L.L.	.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	<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 offic	ce address on our r	ecords, <u>enter the na</u>	ame of the new	registere
agent and/or the new registered office address here:			: 건	, ¬
			; (") ; i) ; ")	, j
Name of New Registered Agent:			<u> </u>	
New Registered Office Address:			, <u>L</u> ā	. • :
rew registered office radiess.	Enter Flor	ida street address		
		, Florida		
	City	, FIOTGA_	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>	Add	ress	Type of Action
AMBR_	BONJOURCLEM INC.	_		
		14681 <u>Bisc</u>	cayne Błyd ste 129, N. Miami Beac	h, FL 33181 WRemove
		<u></u>		□Change
AMBR	ELLAELLA LLC.	14681 <u>Bis</u> c	cavne Blvd ste 129, N. Miami Beac	<u>:h, FL 33181</u> ⊠Add
				Remove
				□Change
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	.		
If an effecti	ve date is listed, the date must b	late of filing: (optional) (optional) be specific and cannot be prior to date of filing or more than 90 days after filing.) Pur	
		ck does not meet the applicable statutory filing requirements, this date will partment of State's records.	not begisted as
e record sp rd is filed.	pecifies a delayed effective (date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90	th day after the
		. 2023	L:1
		nentine Desseaux	
		Signature of a member or authorized representative of a member	
	C	Typed or printed name of signee	