L15000070902

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Special Instructions to Filing Officer:					

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15 JUN-8 AM 8: 27
SECRETARY OF STATE

JUN 1 0 2015 T. HAMPTON

COVER LETTER

то:	Registration Se Division of Cor	ction porations	·	
CUPID	VANEW B	Y BONITO COMPANY COM	IPRESSION GARMENTS LLC	
SUBJEC	CT:		ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		FERNANDA SILVA		
			Name of Person	
		A&F FINANCIAL LLC		
			Firm/Company	
		4851 W HILLSBORO BL	VD STE#A2	
			Address	
		COCONUT CREEK, FL 3	3073	
			City/State and Zip Code	
		AF-FINANCIAL@AF-FIN		
		E-mail address: (to be used for future annual report notific	cation)
For furth	er information co	oncerning this matter, please ca	all:	
FERNA	NDA SILVA		954 464-8298 at ()	Telephone Number
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25.0	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

VANEW BY BONITO COMPANY COMPRESSION GARMENTS LLC

(Name of the Limited	Liability Compan	y as it now appears on our rec ability Company)	cords.)		
The Articles of Organization for this Limited Liab Florida document number L15000070902 This amendment is submitted to amend the follow A. If amending name, enter the new name of the following the following name is a submitted to	bility Company v	vere filed on 04/22/2015	15 JAN -8 AM 8: 27 SECHETARY OF STATE TALLAHASSEE. FLORIDA		
The new name must be distinguishable and contain the wor	ds "Limited Liabilit	y Company," the designation "I	LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicat	ole:	23257 STATE ROAD 7 ST	ΓΕ 203A		
(Principal office address MUST BE A STREET	ADDRESS)	BOCA RATON, FL 33428			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>	4851 W HILLSBORO BLV COCONUT CREEK, FL 33			
B. If amending the registered agent and/or registered agent and/or the new registered office	ce address here:		ords, enter the name of the new		
Name of New Registered Agent:	A&F FINANCIAL LLC				
New Registered Office Address:	4851 W HILLSE	SORO BLVD STE A2			
		Enter Florida street add	dress		
	COCONUT CRE		Florida 33073		
		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 **Title** <u>Name</u> <u>Address</u> Type of Action □ Add ☐ Remove _□ Change _ Add □ Remove ☐ Change _□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change _□ Remove

☐ Change

The company shall conduct any and all lawful business deemed appropriate to execute the con-	mpany's objectives,
including distribution and retail.	
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ctive date, if other than the date of filing: (opt	tional)
effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days aft. If the date inserted in this block does not meet the applicable statutory filing requirements, the ment's effective date on the Department of State's records.	er filing.) Pursuant to 605.
ment of crossing date on the Boparinon of Brail of records.	
ecord specifies a delayed effective date, but not an effective time, at $12\!:\!01$ e 90th day after the record is filed.	a.m. on the earlie
May 15 Joldans	15 JUN SECRET
Signature of a member or authorized representative of a member	-8 ASSI
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