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EXAMINER



200134654952

08/22/08--01035--005 **25.00

COVER LETTER

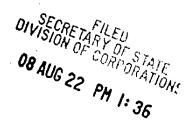
TO: Registration Section Division of Corpo		· •				
SUBJECT: EA LING	ERIE USA, LLC					
(Name of Limited Liability Company)						
The enclosed Articles of Ar	mendment and fee(s) are sub	mitted for filing.				
Please return all correspond	dence concerning this matter	to the following:				
	JOSE C. MARRERO					
		(Name of Person)				
LAW OFFICES OF JOSE C. MARRERO P.A.						
		(Firm/Company)				
	1200 BRICKELL AVE. #5	505				
(Address)						
	MIAMI, FL 33131					
(City/State and Zip Code)						
For further information concerning this matter, please call:						
JOSE C. MARRERO		at (305) 470-2030				
(Name of	Person)	(Area Code & Daytime To	elephone Number)			
Enclosed is a check for the	following 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



EA LINGERIE USA, 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 L	iability Comp	any were filed on JUNE 5, 2007	and assigned	
Florida document number L07000059157	·			
This amendment is submitted to amend the fol	•	liability company here:		
N/A				
The new name must be distinguishable and end w "L.L.C."	ith the words "I	Limited Liability Company," the design	ation "LLC" or the abbreviation	
Enter new principal offices address, if appli	cable:	N/A		
(Principal office address MUST BE A STRE	<u>ET ADDRESS</u>	<u> </u>		
nter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	BOX)			
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:			enter the name of the nev	
New Registered Office Address:	N/A			
		(Enter Florida st	(Enter Florida street address)	
		, Flor	ida	
		(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, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> **Address** Type of Action MGR RIVERA, VANESSA 800 BRICKELL AVE STE 1205 **■** Add ■ Remove MIAMI, FL 33131 ARANGO, JHON JAIRO MGR 31 AMITY PLACE **m** Add STATEN ISLAND, NY 10303 ■ Remove BEL AIR SOUTH, LLC MGR 1880 CENTURY PARK EAST, #200 LOS ANGELES, CA 90067 Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A Dated JUNE 5, Signature of a member of authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00