08000083906

	I 11
(Requestor's Name)	
(Address)	11
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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EXAMINER

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COVER LETTER

TO:

TO:	Registration Solvision of Con			
SUBJE				
50201		Name of Limi	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		CHF	RISTOPHE RAYROLLES	·····
			Name of Person	
			KISS ME LLC	
			Firm/Company	
		100 N BISCAYNE B	LVD - NEW WORLD TOWE	R SUITE 11
			Address	
			MIAMI, FL 33132	
		, , , , , , , , , , , , , , , , , , , ,	City/State and Zip Code	
		F-mail address: (kissmellc@live.fr to be used for future annual report notific	eation)
For fur	ther information of	concerning this matter, please of	·	
	CHRISTO	PHE RAYROLLES	at (_786)	985 1316
		of Person	Area Code & Daytime	Telephone Number
Enclos	ed is a check for t	he following amount:		
∏\$ 25	5:00 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)
	Regist Divisi P.O. B	AING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COURH Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n' ntions nter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ME LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limit	mpany as it now appe	ars on our records.)	
(A Florida Ellilli	ied Liability Company	,	
The Articles of Organization for this Limited Liability Comp	oany were filed on	09/03/2008	and assigned
Florida document number L08000083906			
			•
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company h	<u>ere</u> :	
<u> </u>			
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Com	pany," the designation "L	LC" or the abbreviation
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)			
	411 <u>411 41 41 41 41 41 41 41 41 41 41 41 41 </u>		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, enter t	he name of the new
Name of New Registered Agent:			
N. B 100 411			
New Registered Office Address:		======================================	resp C
	4.	anti i toriuu sirtei uuu	
		, Florida 🍱	
	City	i i	Zip Code
New Registered Agent's Signature, if changing Registered Agent's	ent:	<u></u>	A B M
		73 *** 198	6.5
I hereby accept the appointment as registered agent and	agree to act in this	capacity. I further agi	se to comply with
the provisions of all statutes relative to the proper and c			
accept the obligations of my position as registered agent			
being filed to merely reflect a change in the registered of company has been notified in writing of this change.	ffice aaaress, 1 nere	oy conjirm inai ine iin	шеа навшу
company has been notified in writing of this change.			

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	OTERO, YANINA	100 N BISCAYNE BLVD NEW WORLD TOWER # 110 MIAMI, FL 33132	Add Remove
			Add Remove
			Add Remove
			Add Remove
	*****		Add Remove
	•		Add Remove
D. If amer	nding any other information, en	ter change(s) here: (Attach additional sheets, if necessary.)	_
_			
 Dated	OCTOBER 27th	-, <u>2010</u>	
	Signature o	of a member or authorized representative of a member	
		CHRISTOPHE RAYROLLES	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00