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EXAMINER

COVER LETTER

	gistration Section vision of Corporations	
SUD IF	Elegant Occasions, LLC	•
SUBJEC	Name of Limited Liability Company	
The enclo	ed Articles of Amendment and fee(s) are submitted for filing.	
Please ret	n all correspondence concerning this matter to the following:	
	Barington Bell	
	Name of Person	
	Accounting, Tax & Business Solutions, PA	
	Firm/Company	
	10001 N.W. 50 Street, Ste 204	
	Address	
	Sunrise, FL 33351	
	City/State and Zip Code dpolito@atbsfl.com	
	E-mail address: (to be used for future annual report notification)	5 % 6 %
For further	information concerning this matter, please call:	
Bar	ngton Bell 954,746-0156	
	Name of Person Area Code & Daytime Telephone Number	DEC -7 MI2:
Enclosed	a check for the following amount:	3 5.
\$25.0	Filing Fee U\$30.00 Filing Fee & U\$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Co (additional copy is enclosed)	Fee, f Status &

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

	ant Occasions, LLC				
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now ap Limited Liability Compa	pears on our records ny)	<u>s.</u>)		
The Articles of Organization for this Limited Liability (Florida document numberL08000117333	Company were filed on	December 29,	2008	and assig	ned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	nited liability company	here:			
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Co	mpany," the designat	ion "LLC'	or the ab	breviation
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADD	RESS)	· · · · · · · · · · · · · · · · · · ·	Žů.	83	
			7 (c) 3 (c) 3 (c)	200	
Enter new mailing address, if applicable:			A 20 2	C-7	
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>	E	g a F
			% >		Mag.
.			2 5		
B. If amending the registered agent and/or registered agent and/or the new registered office add		on our records, <u>er</u>	iter the	name of	the new
Name of New Registered Agent:					
New Registered Office Address:					
		Enter Florida stree	et address		
		, Florid			
	City		Z	ip 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>	Name	Address	Type of Action
MGRM	Wayne Labush	3650 Coral Ridge Drive	Add
		# 103-104	Remove
		Coral Springs, FL 3306	55
			Add
			Remove
			Add
			Remove
			RR J
· — ·			Remove
		9-4-0	L Add
			Remove
			Add
			Remove

. If amen	dding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ted	·
	Alex alex
	Signature of a member or authorized representative of a member
	Alex Anta
	Typed or printed name of signee

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Filing Fee: \$25.00