L1000059751

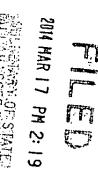
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nam	e)
(Do	ocument Number)	
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WAR 18 204 D. BRUCE

COVER LETTER

TO: Registration Se	ection rporations	
SUBJECT:	Yami ESCO LLC Name of Limited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
	Xiomara Benitez	
	Name of Person Planet Chic Baitique Firm/Company	
	3322 E Atlantie Pooulevard	
	Pompano Beach FL 33062 City/State and Zip Code	•
	City/State and Zip Code Planet Chickout que Com E-mail address: (to be used for future annual preport nounceauton)	E PERSON
For further information of	concerning this matter, please call:	
Name o	of Person Area Code Daytime Telephone Number	
Enclosed is a check for the	the following amount:	
₀25.00 Filing Fee	■ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

Yani E	Sco 2LC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on <u>66 63 10</u>	and assigned
Florida document number <u>L100059751</u> .	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3322 E. Atar	thic Boulevare
(Principal office address MUST BE A STREET ADDRESS)	pom pano Beach	, FL 33062
Enter new mailing address, if applicable:	P0B0x 21042	
(Mailing address MAY BE A POST OFFICE BOX)	Fort buderdale	Lr 33332
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her Name of New Registered Agent:		the name of the new
New Registered Office Address:		F. 10
	Enter Florida street address	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	·	RICK 7
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete	ee to act in this capacity. I further ag	

If Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this desument 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 Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add
			□ Remove
			🗖 Add
			□ Remove
			L Remove
			Add
			□ Remove
			□ Add
			Remove
			2014 MAR 143
			HAYSS DAG
			Add Remove
			□ Add
			☐ Remove

If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
. —	
_	
_	
(The eneci	e date, if other than the date of filing: 63-13-14 (optional) live date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after his document is filed by the Florida Department of State)
Dated _	March 13,
	- Vierra Menter
	Signature of a member or authorized representative of a member
	Xiomara Benitez
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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