#L1100017956

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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K. SALY EXAMINER APR 25 2011

COVER LETTER

| TO: Regist Divisio | ation Section of Corporations | | | | |
|--|--|--|--|--|--|
| SUBJECT: | BOTTEGA IMPORT LLC | | | | |
| Name of Limited Liability Company | | | | | |
| | icles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following: | | | | |
| | MAURIZIO SOLE FESTA Jr. | | | | |
| Name of Person | | | | | |
| BOTTEGA IMPORT LLC | | | | | |
| Firm/Company | | | | | |
| 1717 N. BAYSHORE DR. Unit 1556 | | | | | |
| | Address | | | | |
| • | Miami | | | | |
| | City/State and Zip Code | | | | |
| | Florida E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | | |
| | | | | | |
| | laurizio Sole Festa Jr. atat | | | | |
| | | | | | |
| Enclosed is a ch | ck for the following amount: | | | | |
| \$25.00 Filing | Fee \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) | | | | |
| | MAILING ADDRESS: STREET/COURIER ADDRESS: | | | | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 11 APR 22 PM 12: 07

| Bottega | Import LLC | - 5a Tāt | LAHASSEE, FLORID |
|---|--|---|---------------------------------------|
| (Name of the Limited Liability Com (A Florida Limite | pany as it now app d Liability Compan | ears on our records.) y) | SEE, FLORID |
| The Articles of Organization for this Limited Liability Compa Florida document number <u>L11000017956</u> | ny were filed on _ | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited li | ability company | <u>here</u> : | |
| The new name must be distinguishable and end with the words "Li" "L.L.C." | mited Liability Cor | npany," the designation "LL | C" or the abbreviation |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADDRESS) | | | |
| • | | | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | *** | |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address h | | n our records, <u>enter the</u> | name of the new |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Florida street address | | |
| | | , Florida | |
| | City | | Zip Code |
| New Registered Agent's Signature, if changing Registered Ager | ıt: | | |
| I hereby accept the appointment as registered agent and ag the provisions of all statutes relative to the proper and con accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered office | aplete performan s provided for in | ce of my duties, and I am Chapter 608, F.S. Or, if | familiar with and this document is |

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member Type of Action **Address** Title **Name** Massimiliano Pantaleo 1717 N. Bayshore Drive Unit 1556 Miami, FL 33132 MGRM ☐ Add √ Remove ☐ Add Remove ☐ Add ☐ Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 04/16/2011 Dated ____ Signature of a member or authorized representative of a member MAURIZIO SOLE FESTA Jr.

Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00