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T. HAMPTON
NOV 9 2 2011

EXAMINER

COVER LETTER

TO:	Registration Se Division of Cor		9	
SUBJI	ECT:	SO-PINK SO-CI	HAMPAGNE USA, LLC	
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
AN		ANI	NICK FRANCE MOTTIE	<u> </u>
			Name of Person	
		SO-PINK	SO-CHAMPAGNE USA, LL	С
			Firm/Company	
		3	398 FURLONG WAY	
			Address	
			GOTHA FL 34734	
		- W W	City/State and Zip Code	
			CKMOTTIE@GMAIL.COM to be used for future annual report notific	etion)
For fur	ther information co	oncerning this matter, please of	•	anon)
	ANNICK I	FRANCE MOTTIE	at (_407_)8	70-3831
Name of Person		Person	Area Code & Daytime	
Enclose	ed is a check for th	e following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		NC ADDDESS.	CTDFET/COUDIE	D ADDRESS.

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

FILED

2011 NOV 21 PM 1: 40

SO-PINK SO-CHAMPAGNE USA, LECURETARY OF STATE (Name of the Limited Liability Company as it now appears on Airlreodais SEE, FLORIDA (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability C	ompany were filed on NOV	EMBER 15, 2011 and assigned
Florida document number L11000129623	_·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company,	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDR	RESS)	

Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	,	
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		records, enter the 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 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 Changing Registered Agent, Signature of New Registered Agent

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
MGR	CHRISTOPHER R KABA	3398 FURLONG WAY GOTHA FL 34734	Add Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
			Add Remove _
	<u> </u>		Add Remove _
			Add Remove
·			Add Remove
		s) here: (Attach additional sheets, if necessary.) AH SSE FLORIDA	FILED NOV 21 PM
Dated	NOVEMBER 17 , 201	1 <u> </u>	٠, ٠٣٠
	Signature of a member of	authorized representative of a member	<u></u>
_	ANNICK	FRANCE MOTTIE printed name of signee	

Page 2 of 2

Filing Fee: \$25.00