

L12000110126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

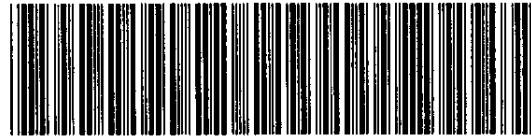
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

NC

Office Use Only



100250309161

08/05/13--01012--018 \*\*25.00

2013 AUG -5 AM 8:52  
FILING OFFICE  
JUL 11

J. SAULSBERRY  
EXAMINER

AUG 07 2013

**COVER LETTER**

**TO: Registration Section  
Division of Corporation**

**SUBJECT: ITALY4US, LLC.**

(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAMELA FALCONI

(Name of person)

ITALIAN LUXURY GROUP, LLC.

(Firm/Company)

4515 ALTON ROAD

(Address)

MIAMI BEACH, FL 33140

(City/State and Zip Code)

FILED  
2013 AUG -5 AM 8:52  
STATE  
TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

PAMELA FALCONI at 1-917-328-0546

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 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)

**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**

ITALY4US, LLC.

(Name of the limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08-27-12 and signed

Florida document number L12000110126.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

ITALIAN LUXURY GROUP, LLC.

The new name must be distinguishable and end with the words, "Limited Liability Company," the designation, "LLC," or the abbreviation, "L.L.C."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2013 AUG -5 AM 8:52	FILED
STATE OF FLORIDA	CLERK OF CIRCUIT COURT
JACKSONVILLE	

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name if New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_ ( Enter Florida street address)

\_\_\_\_\_ (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, 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>	<u>Address</u>	<u>Type of Action</u>
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove

If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

---



---



---



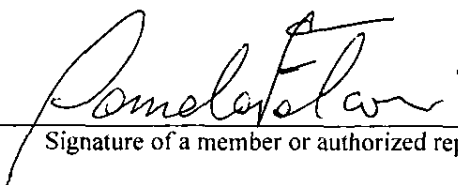
---



---

FILED  
2013 AUG -5 AM 8:52  
TALLAHASSEE, FLORIDA

Dated AUGUST 1, 2013.

  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member  
 \_\_\_\_\_  
 PAMELA FALCONI  
 \_\_\_\_\_  
 Typed or printed name of signee