## L12000133304

	•	
(Red	μestor's Name)	
(Add	dress)	
·	·	
(Add	dress)	
(City	//State/Zip/Phone #	<i>f</i> )
PICK-UP	■ WAIT	MAIL
(Bus	siness Entity Name	e)
(Doc	cument Number)	
Certified Copies	Certificates c	of Status
Octanica Copies	. Cerunicates o	or Otalus
Special Instructions to F	Filing Officer:	

Office Use Only



700259801557

05/05/14--01034--004 \*\*25.00

ZELVELLY OF STATE
SECRETARY OF STATE
OF THE SECRETARY OF STATE
OF THE

MAY 1 2 2014 T CLINE

## **COVER LETTER**

TO: Registration Se. Division of Cor			
/ <sub>SUBJECT:</sub> Elyse	Louis, LLC		
	Name of Limited Liability Company		
The enclosed Articles of	Amendment and fee(s) are submitted for filing.		
Please return all correspon	ondence concerning this matter to the following:		
	William E. Bonner		
	Name of Person		
	International Tax & Commerce, LLC		
	Firm/Company		
	12025 Riverhills Drive	<b>20</b>	
	Address	ESS ESS	N
	Tampa, Fl. 33617	2014 MY -5 SESACTARY TALLAHASSE	 ?"
	City/State and Zip Code		į
	Bonnerbbc@aol.com	er 51/02 10	1
	E-mail address: (to be used for future annual report notification)		
For further information co	oncerning this matter, please call:	्या 📾	
William E. E	Bonner813 871-0040		
Name of			
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Certificate of Status Certified Copy Certificate	ng Fee, of Status &	

MAILING ADDRESS:

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

## STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

/ Elyse Louis, LLC		
(Name of the Limited Liability C	ompany as it now appears on our records. nited Liability Company)	)
	/	
The Articles of Organization for this Limited Liability Com	pany were filed on 10/19/2012	and assigned
Florida document number <u>L12000133304</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and end with the words "Limited	d Liability Company," the designation "LLC"	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	田田
		55 6
		<b>T</b>
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		enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
	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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

Type of Action  Way  estershire  □ Remove  □ Add  Remove  □ Remove  □ Remove  □ Remove
estershire  Gremove  Gremove  Add  Add  Remove  Remove
Pagdom  Nay  ■ Add  estershire  □ Remove
odom  Nay  ■ Add  estershire  □ Remove
estershire   Remove
estershire □ Remove
·
ZRemove ZSCRET ZNE SHA
## ## ## ## ## ## ## ## ## ## ## ## ##
Add
Remove
□ Remove

	ional member - Aurelie Schweitzer khisting member - Julien E. Schweitzer
As per above	1
Effective date, if other than the date (The effective date must be specific, cannot be the date this document is filed by the Florida	prior to date of receipt or filed date and cannot be more than 90 days after
Dated May 1	, 2014
	Wh Bonn
William E. Bon	ature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SELRETARY OF STATE