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## **COVER LETTER**

	Registration Se Division of Cor			
enb tre	MACYLAN	IE LLC		
SOBJEC	.1;	Name of Lim	ited Liability Company	
		Amendment and fec(s) are sub		
r lease le	uun an contespo	Severine Gianese-Pittma		
			Name of Person	
		Gianese-Pittman P.A.		
			Firm/Company	
		100 N, Biscayne Blvd su		
			Address	······································
		Miami, Fl. 33132		
		<del></del>	City/State and Zip Code	-
		sgianese@sgpittman.con		
		E-mail address: (	to be used for future annual report notifi	eation)
For furth	er information c	oncerning this matter, please co	all:	
Severin	e Gianese-Pittr		305 7225986	
	Name o	f Person	at ()Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount		
₩ \$25.0	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)
	N/ 17	ive apprice.	CTD CTT/CAUDI	ED ANDDESS,

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

MACYLANE LLC		
( <u>Name of the Limited Li</u> (A F	ability Company as (t now appears on our records.) orda Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number 4.12000135786	ty Company were filed on 10/25/2012	and assigned
This amendment is submitted to amend the followin	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET Al	ODRESS)	<b>8</b> 등인
		<b>2</b> 44
		<b>ထဲ</b>
Enter new mailing address, if applicable:		8 PH 12:
(Mailing address MAY BE A POST OFFICE BOX	2	·
		8 18 NO
B. If amending the registered agent and/or registered agent and/or the new registered office		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street uddress	
	, Flori	ida
	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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Remi Canova	Petile Route Des Baux,	□ Add
		Saint Remy de Provence, FR	
			☐ Change
MGR	Jean Lachance	22280 Tupelo PŁ, Boca Raton,	BAdd
		FL, 33428	☐ Remove
			Change
			D Add
			Remove
			☐ Change
		······································	□ Remove
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ffective date, if other than the an effective date is listed, the date in Note:  If the date inserted in this bocument's effective date on the F	st be specific and cannot be prior to date of filing or more ock does not meet the applicable statutory filing t	(optional) than 90 days after fiting.) Pursuant to 605.0207 equirements, this date will not be listed as
e record specifies a delaye The 90th day after the re	d effective date, but not an effective tin ord is filed.	ne, at 12:01 a.m. on the earlier of
June 20	2018	
	Signature of a member or authorized representative of	a member
v. E.A.	•	FIDUCIAL JADE INC
UCIVIE IS	Typed or printed name of signee	<u>OFFICE</u> 701 MIAMI, FL 33132

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