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SECRETARY OF STATE

J. SAULSBERRY EXAMINER DEC 17 2012

COVER LETTER

TO: Registration Se Division of Cor					
SUBJECT: So	cial Style Ll	C ed Liability Company			
	Amendment and fee(s) are subr				
Please return all correspo	ndence concerning this matter t	o the following:			
	Nato	Allye Alzerreca - To	orres		
	Soc	ial Style LLC Firm/Company			
		.w. 58 th St. #38	<u>}</u>	20	
		Address	¥T.¥	12 O	
	Doral	FL . 33178 City/State and Zip Code	S	2012 DEC 14 Segretary	T IT U
		City/State and Zip Code		₹ -	
	socialst	yleonline eicloud.co	м 🚆	음 ₹	IT
	E-mail address: (to	be used for future annual report notification	on) <u> </u>	Y OF STAT	<u> </u>
For further information c	oncerning this matter, please ca	11:	ŝ	114 AM 8+30	
Natallye A	Alzerreca - Torres	at (<u>305) 609 - 235</u> 9	9	_	
Name o	f Person	Area Code & Daytime Te	lephone Number		
B 1 1 1 1 1 2 2	6.11				
Enclosed is a check for the	-				
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	☐\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fe Certificate of S Certified Copy	Status &	

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Soci	cial Style LLC	
(<u>Name of the Limited Li</u> (A FI	ability Company as it now appears of orida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liab Florida document number <u>L12000138 6 2</u>		ober 31, 2012 and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Company	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	le:	·
(Principal office address MUST BE A STREET).	ADDRESS)	2812 S.E.
		C I L
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	(DX)	FS &
	·	DATE 3
		> 0
B. If amending the registered agent and/or		r records, <u>enter the name of the new</u>
registered agent and/or the new registered offic	e address here:	
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 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>	Name	Address	Type of Action
MGR	Eduardo R. Torres	10773 N.W. 58 th St. #382	Add
		<u>Ніамі, FL. 33178</u>	Remove
<u>MGRM</u>	Eduardo P. Torres	10773 N.W. 68th st. #382	
		Miami, FL. 33178	Remove
MGRM	Nicolle Mailal	10773 N.W. 58th st #382	Add
		Miami, FL. 33178	Add Remove
<u>М</u> бен_	Natallye Alzerreca - Torre	Miami, FL. 33178 Miami, FL. 33178 PS 10713 N.W. 58 th st #3882 Miami, FL. 33178.	Add
		Miami, FL. 33178.	Remove
			Add
			Remove
			- Add
			Remove
		•	

D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	EIN: 90-0905799
	LIN: 10 0105111
	ulvalia
Dated _	11/13/12
	Matallye Aherrica - Torres. Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Natallye Alzerreca Torres.
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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