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B. BOSTICK

JAN 1 5 2013

EXAMINER

COVER LETTER

TO: Registration Section **Division of Corporations** Lafayette LLC Name of Limited Liability Company The enclosed Articles of Amendment and fce(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Bruno Azoulay Name of Person Lafayette LLC Firm/Company 927 Lincoln Rd #200 Address Miami Beach, FL 33139 City/State and Zip Code brunoazoulay@yahoo.fr E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Bruno Azoulay 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

Lafayette LLC					
(Name of the Limited (A	Liability Company Florida Limited Liab	as it now appears on oblity Company)	our records.)		
The Articles of Organization for this Limited Life Florida document number L1300004203		ere filed on 01/09/2	2013	and assig	ned
This amendment is submitted to amend the follo	owing:				
A. If amending name, enter the new name o	f the limited liabilit	ty company here:			
The many and the Best with the Line of the State of the Line of the Line of the Line of the State of the Line of the	A at a series	Tricking	h. 4	" alala	
The new name must be distinguishable and end wit "L.L.C."	in the words "Limited	Liability Company, "to	ne designation "LLC	or the abt	reviation
Enter new principal offices address, if applic	able:	927 Lincoln Rd #2	200 Miami Beag	ի, FL <u>3</u> 3	139
(Principal office address MUST BE A STREE	T ADDRESS)		<u></u>	3 JAN	
	-		- - 2 88	**	
Enter new mailing address, if applicable:			 	(일) (일)	
(Mailing address MAY BE A POST OFFICE BOX)			Ģ	္ ယ္	-
	-			9	
B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent:		e address on our r	ecords, <u>enter the</u>	name of	the new
New Registered Office Address:	927 Lincoln	Rd #200			
riow regionary office runtess.		Enter Fl	orida street addres:	5	
	Miami Beac		, Florida <u>3313</u>	39	
	•	City	2	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, <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>	<u>Name</u>	Address	Type of Action
mgrm	Agnes Azoulay	950 Euclid Miami Beach FL.33139	Add
			Remove
mgrm	Emilie Azoulay	950 Euclid Miami Beach Fl.33139	Add
			Remove
mgrm	Ernest Azoulay	950 Euclid Miami Beach Fl.33139	Add
			Remove
mgrm	Elodie Azoulay	950 Euclid Miami Beach Fl. 33139	Add
			Remove
mgrm	Stephanie Azoulay	950 Euclid Miami Beach Fl.33139	Add
			Remove
			Add T
			Remove

• ,	enter change(s) here: (Attach additional sheets, if necessary.)
Amend address of Bruno Azoulay N	Managing Member to: 927 Lincoln Rd #200 Miami Beach Fl. 33139
 	
-	
ted January 10th	2013
	\overline{M}
Signature	of a nember of authorized representative of a member
Bruno Azoulay	
** · · · · · · · · · · · · · · · · · ·	Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

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