

L13000058895

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

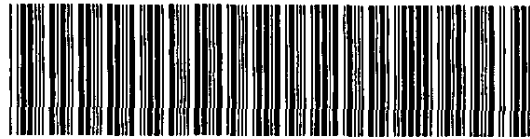
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400250979794

09/03/13--01053--003 **25.00

CLERK OF COURT
TALLAHASSEE, FLORIDA

2013 SEP -3 PM 4:35

FILED

B. BOSTICK

SEP 04 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **ZYANCE FURNITURE 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:

DAVY VUJASIN

Name of Person

ZYANCE FURNITURE LLC

Firm/Company

1717 N BAYSHORE DR APT 3335

Address

MIAMI, FL 33132

City/State and Zip Code

GAELELV12@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVY VUJASIN

Name of Person

786 970-6015

at ()

Area Code & Daytime Telephone Number

RECEIVED
TALLAHASSEE, FL 32301
SEP 3 2013

2013 SEP -3 PM 4:35

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**

ZYANCE FURNITURE 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 04/23/2013 and assigned
Florida document number L13000058895

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 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 ADDRESS)

2800 BISCAYNE BLVD STE 100

MIAMI, FL 33137

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2800 BISCAYNE BLVD STE 100

MIAMI, FL 33137

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 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 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>
MGRM	ZYANCE LLC	1717 NORTH BAYSHORE DRIVE #3335	<input type="checkbox"/> Add
		MIAMI, FL 33132	<input checked="" type="checkbox"/> Remove
MGRM	GHZYANCE LLC	1717 NORTH BAYSHORE DRIVE #3335	<input type="checkbox"/> Add
		MIAMI, FL 33132	<input checked="" type="checkbox"/> Remove
MGRM	VUJASIN, DAVY	1717 NORTH BAYSHORE DR APT 3335	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33132	<input type="checkbox"/> Remove
MGRM	VUJASIN, JEAN MARC	1717 NORTH BAYSHORE DR APT 3335	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33132	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2013 SEP - 3 PM 4:30
TALLAHASSEE, FLORIDA

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

Dated AUGUST 28, 2013

Signature of a member or authorized representative of a member
DAVY VUJASIN

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2013 SEP -3 PM 4:35
STATE COURT OF FLORIDA
TALLAHASSEE, FLORIDA