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COVER LETTER

TO:

Registration Section

Division of Co	rporations			
	CAYNE DECOR BOUTIQUE,	L.L.C.		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	ARTURO YERO			
		Name of Person		
	ARTURO YERO P.A.			
	ARTORO CEROTA.	Firm/Company		
	7.5E			
	二二二 超岸工			
		Address	10 5	
	MIAMI FLORIDA 33126		FILED 11 2 49	
	A DET IN OVER OCA MEN	City/State and Zip Code		
	ARTUROYERO@AYERO	to be used for future annual report notifi	cation) = Fin 5	
For further information	concerning this matter, please c	·		
ARTURO YERO	71	305 444 0884		
	of Person	at ()	Telephone Number	
Name	or reison	Area Code Dayume	receptione (varioe)	
Enclosed is a check for t	he 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)	
Regist Divisi P.O. E	ING ADDRESS: ration Section on of Corporations Box 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	tions ster Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KEY BISCAYNE DECOR BOUTIQUE, L			·····
(<u>Name of the Limited Liabli</u> (A Florid	lity Company as it new app la Limited Liability Compan	y)	
The Articles of Organization for this Limited Liability	Company were filed on	SEPTEMBER 13, 2013	and assigned
Florida document number L13000130022	•		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company	here:	
UNO DUE TRE DESIGN, L.L.C.			그선 대
The new name must be distinguishable and contain the words "Lin	nited Liability Company," th	ne designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			20月
Principal office address MUST BE A STREET ADD	<u>RESS)</u> .		2/2 0 M
			<u> </u>
			13:19
Enter new mailing address, if applicable:	<u></u>		2周 6
Mailing address MAY BE A POST OFFICE BOX)			
	 -	-	
B. If amending the registered agent and/or regi		on our records, enter	r the name of the n
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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
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