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AND ASSESSED FROM DA

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## **COVER LETTER**

SUBJECT: Couture by J Boutique LLC  Name of Limited Liability Company
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:
This Viera  Name of Person
Couture by J Boutique LLC
13155 SW 134 St # 121 Address
Migni, F1 33186
City/State and Zip Code  Couture by J Boutique @ gmail.configue  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
For further information concerning this matter, please call:
This Viera at 305 900 - 0152  Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)  Cartificate of Status Certified Copy (additional copy is enclosed)

### MAILING ADDRESS:

TŐ:

Registration Section
Division of Corporations

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

Coutone by J	- Boutige	e LL	2		
Cowole by J (Name of the Limited Limi	ability Company as lorida Limited Liabil	s it now appears of ity Company)	n our records.)		
The Articles of Organization for this Limited Liab Florida document number <u>113000140</u>		e filed on 10/	04/2013	and assi	gned
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of the	ne limited <u>l</u> jability	company here:			
The new name must be distinguishable and end with t "L.L.C."	he words "Limited I	Liability Company,	the designation "	LLC" or the al	breviation
Enter new principal offices address, if applicab	ole:			201 7A::	
(Principal office address MUST BE A STREET	ADDRESS) _			<u> 돌</u> 일 <b>R</b>	<u>"N</u>
900	<del>-</del>			C-2 PM	
Enter new mailing address, if applicable:	_			<del></del>	7
(Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>			r: 07	
B. If amending the registered agent and/or registered agent and/or the new registered office		address on our	records, enter	the name of	the new
Name of New Registered Agent:		Viera			
New Registered Office Address:	13155 5	5W 134 Enter	S+ # Florida street ad	/2/ Idress	
	Miam.	Enter	, Florida _	3318	6
New Registered Agent's Signature, if changing Re		ny		zip Coae	

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.

In Changing Registered Agent, Signature of New Registered Agent

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 Title Address Type of Action Name MGR Judith Viera 13155 SW 134 St Add
Soute 121 Remove Migni, F1 33,86 MGR Ibis Viera 13155 SW 134 St XAdd Suite 12/ Miami, 61 33186 Remove Remove Remove Remove

D. If an	pending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated _	11/01/ ,20/3
	Signature of a member or authorized representative of a member
	Judith Vien
	Typed or printed name of signee

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