

L14000021342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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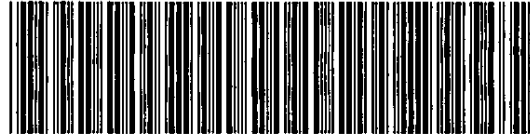
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W. G. G. NOV - 3 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Vintique by Design L.L.C.

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:

Diann M. Bertalan and Kerrilynn Kranich

Name of Person

Vintique by Design L.L.C.

Firm/Company

2552 Morning Star Place

Address

Oviedo, Fl. 32765

City/State and Zip Code

vintiquebydesign@gmail.com

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

For further information concerning this matter, please call:

Diann Bertalan

352 217-0225 or 727-2343794
at (_____) _____
Area Code Daytime Telephone Number

Name of Person

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**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE VINTIQUE BOUTIQUE, 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 2/7/14 and assigned
Florida document number L14000021342.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

VINTIQUE BY DESIGN, L.L.C.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2552 Morning Star Place

(Principal office address MUST BE A STREET ADDRESS)

Oviedo, Fl. 32765

Enter new mailing address, if applicable:

2552 Morning Star Place

(Mailing address MAY BE A POST OFFICE BOX)

Oviedo, Fl. 32765

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:

Diann M. Bertalan

New Registered Office Address:

2552 Morning Star Place

Enter Florida street address

Oviedo

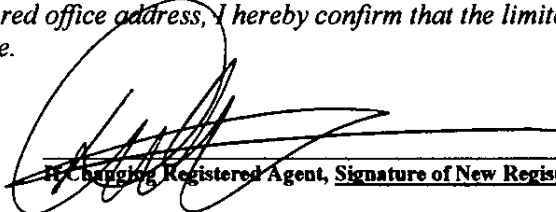
City

Florida 32765

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.


Diann M. Bertalan, 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Kerrilynn Kranich	2552 Morning Star Place Oviedo, F	☒ Add
			☐ Remove
			☐ Change
AMBR	Diann M. Bertalan	2552 Morning Star Place Oviedo, F	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

1 ALAINASSE...

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated October 30 2015

Signature of a member or authorized representative of a member

Diann M. Bertalan

Typed or printed name of signee