114000027051

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(Ad	dress)	
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MAY - 8 2014

T. BROWN

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Exquisite Global Properties, LC 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:
Trene Horuzhik
Exquisite Global Properties, Le
162 NE 40 Lb Street
Miani, FL 33137
City/State and Zip Code 10 exquisite global. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Thene Holuzhik at (404) 731-7722 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \times S25.00 Filing Fee & Certificate of Status \times Certified Copy (additional copy is enclosed) \times S60.00 Filing Fee, 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

ARTICLES OF O	RGANIZATION	The Age
O	F 9%	a to the same of t
(Name of the Limited Liability Compar (A Florida Limited L	PROPERTIES LLC Ny as it mow appears on our records.) iability Company)	The state of the s
The Articles of Organization for this Limited Liability Company	were filed on $02/17/20$	14 and assigned
Florida document number <u>L14000027051</u> .	, in the second	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and end with the words "Limited Liabi	lity Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, <u>ente</u> :	r the name of the new
Name of New Registered Agent:		
New Registered Office Address:	E El. : I	
	Enter Florida street address	
	, Florida _	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

	1ember being added or removed from o	our records:	or each manager
MGR = Ma AMBR = Au	nnager athorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	Inna Horuzhik	162 NE yoth St, Miami	🗗 Add
			□ Remove
			Add
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ne effectiv	date, if other than the date of filing:
he effectiv he date th	we date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
he effective he date the	April 22 nd, 2014. April 22 nd, 2014.
the effective the date the	we date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
The effective	April 22 nd, 2014. April 22 nd, 2014.

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Filing Fee: \$25.00