

(Re	equestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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Special Instructions to	Filing Officer:			





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COVER LETTER

TO:		on Section f Corporations		
SUB IE	Equis	rrc		
SUBJEC	C1:	Name of Li	mited Liability Company	
The enci	losed Articl	es of Amendment and fee(s) are su	abmitted for filing.	
Please re	etum all co	respondence concerning this matte	er to the following:	
		Cesar Hirsch		
			Name of Person	
		Equis LLC		
FirmvCompeny		Firm/Company		
		11101 S Crown Way Suit	te 8	
			Address	
Wellington, Florida 33414				
		info@equisboutique.com	City/State and Zip Code	
		** '	(to be used for future annual report notification)	
For furth	er informa	tion concerning this matter, please	call:	
Cesar H	irsch		561 9066368 at (
Name of Person Area Code Daytime Telephone Number		Area Code Daytime Telephone Number		
Enclosed	d is a check	for the following amount:		
□ \$ 25	.00 Filing F	ce \$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)	
		ion Section	Street Address: Registration Section	
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee	
		see, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Note:
Attached is a copy of the transfer of ownership Agreement.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Equis, LLC		
(Nesse of the Limited Limitaly Common (A Fauncia Limited	env as it new represent on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L14000160940	y were filed on October 15, 2014 and assigned 2007 2007 2007 2007 2007 2007 2007 200	
This amendment is submitted to amend the following:	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
A. If amending same, enter the new name of the limited lish	Wilty company here:	
The new mane must be distinguishable and contain the words "Limited Lishi	they Company," the designation "LLC" or the abbreviation "LLC"	
Enter new principal offices address, if applicable:	· ·	
(Principal office address MUST BE A STREET ADDRESS)	IIIOI S CROWN WAY STE 8	
	WELLINGTON, FLORIDA 33414	
Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BOX)	11101 S CROWN WAY STE 8 WELLINGTON, FLORIDA 33414	
B. If amending the registered agent and/or registered office: agent and/or the new registered office address here:	address on our records, <u>enter the name of the new resistered</u>	
Name of New Registered Agent:	-	
New Registered Office Address:		
	Exter Flurida street address	
	, Florida	
	City Zip Code	
New Registered Agent's Signature. If changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to masses, enter the title, name, and address of each person, being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	ELENA COUTTENYE	13244 POLO CLUB RD UNIT C-106	□Add
		WELLINGTON, FL 33414	_ MRamove 17
		•	_Dames CT 2
			_ DAM P
			_ □Remove DD OCT 26 PH 3:15
			_ Change
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			CRemove
			C Add
			□Remove
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			CFAdd
			□Remove
			CJAdd
			CRemove

_ Change

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. Effective date, if other than the date of filing:	
(If an effective date is listed, the date must be specific and cannot be prior to date of filling or more than 90 days after filling.) Pursuam to 605,0207 (3)(b Note: If the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as the document's effective date on the Department of State's records.)
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the cord is filed.	
Dated October, 12 , 2020 .	
Stignature of a member or authorized representative of a member	
Cesar Hirsch Typed or printed name of signee	

Filing Fee: \$25.00