## 114000168896

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## **COVER LETTER**

TO:				
SUBJE				
0020	· · · · · · · · · · · · · · · · · · ·	· •	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
Division of Corporations  Tatoune, LLC SUBJECT:				
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		Belis Law Firm		
			Fim/Company	
		760 319th Ave Dr West		
			Address	<del></del>
		Bradenton, FL 34209		
			City/State and Zip Code	<del></del>
				_
		E-mail address: (1	to be used for future annual report notific	cation)
For furth	ner information c	oncerning this matter, please ca	ill:	
Carolin	e Belis		941 447-9934 at ( )	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne following amount:		
<b>⊒</b> \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

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

Tatoune, LLC		
(Name of the Lim	ited Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited I	Liability Company were filed on $\frac{10^{\circ}}{2}$	30/2014 and assigned
florida document number L14000168896	·	•
his amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the de	signation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	E BOX)	
		17
	···	20 73
3. If amending the registered agent and	l/or registered office address on	our records. enter the name of the no
egistered agent and/or the new registered o	office address here:	
Name of New Registered Agent:	Caroline Belis	<u> </u>
New Registered Office Address:	7603 19th Ave Dr West	; <del>•</del>
	Enter Flori	da street address
	Bradenton	Florida <sup>34209</sup>
	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>	<u>Address</u>	Type of Action
AMBR	Olivier Chastan	115 Norfolk St, #202	
		new York, NY 10012	■ Remove
			Change
AMBR	Chastan Family Trust	6306 Thorndon Circle	
		Bradenton, FL 34201	Remove
			Change
			Add
			□ Remove
			□ Change
			☐ Add (?)  ( , , , , , , , , , , , , , , , , , ,
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		-:	E
Tective date, if other than the date of filing:	(optional)		CO
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 ote: If the date inserted in this block does not meet the applicable statutory filing requiren occument's effective date on the Department of State's records.	days after filing.) nents, this date w	Pursuant to vill not be	60 <b>5.0</b> 207 list <b>ēd</b> as
e record specifies a delayed effective date, but not an effective time, at . The 90th day after the record is filed.	12:01 a.m. o	n the ea	arlier of
ited <u>(8   25 / 2 c ; ?</u>			
· · · · · · · · · · · · · · · · · · ·			
- '			
Signature of a member or authorized representative of a member	ei		-

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Filing Fee: \$25.00