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APR 0 7 2017
S. YOUNG



COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	Ro	OSE D. C. Name of Lim	10+hing ited Liability Company	LLC	
The enclosed Ar	ticles of Am	endment and fee(s) are sub	mitted for filing.		
Please return all	corresponde	ence concerning this matter	to the following:		
		SHAYI	A DENR Name of Person	JRG	
		ROSE .	D. CLOTH	ING I	NC
		4600	KENT P	₹VE.	
			City/State and Zip Code		
	_	SHAVA © Ro.	to be used for future annual	report notification	n)
For further infor	mation conc	erning this matter, please c	all:		
SHAYA	DEN!		at (<u>Sl</u> Y Area Code)	Ohaytime Telep	7554 Ohone Number
Enclosed is a che	eck for the fo	ollowing amount:			
□ \$25.00 Filin	g Fee I	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is en		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registration Division of P.O. Box 6	f Corporations	Registra Division Clifton I 2661 Ex	T/COURIER A tion Section of Corporations Building ecutive Center C see, FL 32301	;

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROSE D CLOTHING LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

of Organization for this Limited Liability Company was filed on AVG. 216, 2015, and o

The Articles of Organization for this Limited Liability Company were filed on AUG. 2015 and assigned Florida document number LISO00146435.

This amendment is submitted to amend the following:

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

BODY BEANTIFUL SHAPEWEAR UCC

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

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 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:

New Registered Office Address:

Enter Florida street address

Enter Florida street address

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.

City

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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Remove
			☐ Change
			□ Add
			□ Remove
		☐ Change	
			TANGE TO SECOND
			Remove SSE
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The 90th day after the record is filed.	to 605.0207 (e listed as t
ned MARCH 29. , 2017.	earlier of:
A Mari	
Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00