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FILED 2016 OCT 24 P 2 111 SECRETARY OF STATE

> D. BRUCE OCT 25 2016

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ELIXYS CAPITAL LLC 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:
Arthur de BARRAU Name of Person
Elixys Copital LLC Firm/Company
1637 NE 4th ct
FORT LAUDERDALE FL 33301 City/State and Zip Code
E-mail address: (to be used for futilize annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Arthur de BARRAU at 954 289 7223 22 Name of Person Area Code Daytime Telephone Number 7
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\Bigcup \text{\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$60.00 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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELIXYS' CAPITAL	LLC
(Namé of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on $04/18/2016$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1637 NE 4th of
(Principal office address MUST BE A STREET ADDRESS)	FL 33301
Enter new mailing address, if applicable:	1637 NE 4th of
(Mailing address MAY BE A POST_OFFICE BOX)	fort landerdale Pl 33301
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	TAS
	Enter Florida street address
New Registered Agent's Signature, if changing Registered Agent:	City On Zhrode
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties, and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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 amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
MGR	Jean Marc Bosson	1637 NE 4th ct	Ż XAdd
	U	Fort Lauderdale	Remove
		PL 33301	Change
MGR	Salvine Bosson	1637 NE 4th at	🖼 Add
		Cort Lauderdale	□ Remove
		PL 33301	Change
MGR	Gaspard Bosson	1637 NE 4th ct	
	f	Fort Lauderdale	Remove
		FL 33301	Change
MGR	Thomas Bosson	1637 NE 4th ct	⊠ Add
		Fort Landerdale	□ Remove
		PL 33301	Change
MGR	Jules Bosson	1637 NE 4th ct	 ▼ Add
	U	bort lauderdas	8□ Remove
		PL 3330/1 ASSE	Chapa D
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	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days. If the date inserted in this block does not meet the applicable statutory filing requirements.	after filing.)		
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