## 116000212074

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## **COVER LETTER**

TO:	Registration Sect Division of Corpo	ion prations		
SUBJEC		LECTION LLC		
SODJE		Name of Lim	ited Liability Company	
The encl	osed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspond	dence concerning this matter	to the following:	
		ALBERTO J. SOLORZAN	10	
		OLLECTION LLC  Name of Limited Liability Company  of Amendment and fee(s) are submitted for filing.  condence concerning this matter to the following:  ALBERTO J. SOLORZANO  Name of Person  NOA'S COLLECTION LLC  Firm/Company  1449 CAPRI LANE APT. 6210  Address  WESTON, FLORIDA 33326  City/State and Zip Code  ALBERTO@SOLORZANO.COM  E-mail address: (to be used for future annual report notification)  concerning this matter, please call:		
			Firm/Company	
		1449 CAPRI LANE APT.	6210	
			Address	
		WESTON, FLORIDA 33	3326	
			City/State and Zip Code	Person  Inpany  Sis  Zip Code  Ire annual report notification)  662-7272
		=		
		E-mail address: (	to be used for future annual report notifi	cation)
For furth	ner information cor	ncerning this matter, please ca	all:	
MARIB	EL CASANOVA		at (	
	Name of I	Person	Area Code Daytime	Telephone Number
Enclosed	d is a check for the	following amount:		
□ \$25.	00 Filing Fee		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

NOA'S COLLECTION LLC	
(Name of the Limited Liability Company as it now (A Florida Limited Liability Con	y appears on our records.) mpany)
The Articles of Organization for this Limited Liability Company were filed Florida document number $\frac{L16000212074}{L16000212074}$ .	on NOVEMBER 18, 2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	any here:
The new name must be distinguishable and contain the words "Limited Liability Company	y," the designation "LLC" or the 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 office address here:  Name of New Registered Agent:	ess on our records, <u>enter the name of the new</u>
Name of New Registered Agent.	
New Registered Office Address:	nter Florida street address
	, Florida
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 provisions of all statutes relative to the proper and complete performa accept the obligations of my position as registered agent as provided five being filed to merely reflect a change in the registered office address, a company has been notified in writing of this change.	nce of my duties, and I am familiar with and for in Chapter 605, F.S. Or, if this document is

Page 1 of 3

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	AINOA U SOLORZANO	1449 CAPRI LANE APT 6210	
		WESTON, FLORIDA 33326	■ Remove
			□ Change
MGR	ALBERTO J SOLORZANO	1449 CAPRI LANE APT 6210	Add
		WESTON, FLORIDA 33326	☐ Remove
			☐ Change
AMBR	ANDER A SOLORZANO	A SOLORZANO 1449 CAPRI LANE APT 6210	<b>□</b> Add
		WESTON, FLORIDA 33326	□ Remove
			□ Change
AMBR	AITOR G. SOLORZANO	1449 CAPRI LANE APT. 6210	<b>⊒</b> Add
		WESTON, FLORIDA 33326	□ Remove
			Change
AMBR	ALBERTO J. SOLORZANO	1449 CAPRIL LANE APT. 6210	
		WESTON, FLORIDA 33326	■ Remove
		<del> </del>	Change
<del></del>	- 6 - 8 - 5 - 5 M		<b>1 1 2 2 3 3 3 3 3 3 3 3 3 3</b>
			Remove
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an effec ote: If	e date, if other the tive date is listed, the f the date inserted in this effective date of	date must be specif n this block does	fic and cannot be p not meet the ap	prior to date of filing plicable statutory	or more than 90 days a filing requirements,	ptional) fter filing.) Pursuant this date will not	to 605.0207 ( be listed as t
	ord specifies a d 90th day after t			not an effectiv	ve time, at 12:0	1 a.m. on the	earlier of:
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ated <u></u>		S. Harrison	of a member or a	authorized represent	ative of a member	A SS	₩ F I

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Filing Fee: \$25.00