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## **COVER LETTER**

TO: Registration Se Division of Co		•	
	ls Creations, LLC		
Sobsect,	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jerry Enriquez		
		Name of Person	
		Firm/Company	
	17775 NW 87 Court		
	<del></del> ,	Address	
	Hialeah, FL 33018		
	<del></del>	City/State and Zip Code	
		-	ication)
For further information of	concerning this matter, please co	all:	
Division of Corporations  SUBJECT:  Best Trends Creations, 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:    Jerry Enriquez			
Name o	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status &

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

Best Trends Creations, LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lin	Company as it now appears on our records.) mited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Com	npany were filed on November 18,2016	and assigned
Florida document number L16000212218		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	55)	
•		30
Enter new mailing address, if applicable:		6 DE
(Mailing address MAY BE A POST OFFICE BOX)		ASS C
		M{ <b>60</b>
		- B
B. If amending the registered agent and/or registered	ed office address on our records, enter	the name of the ne
registered agent and/or the new registered office address	s here:	<b>5</b> €
		. هنر
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	Zin 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>	Address	Type of Action
MGR	Andrea Guevara	15453 SW 143 Terrace, Miami, FL	□ Add
			Remove
			Change
MGR	Stephanie Ferreira	15453 SW 143 Terrace, Miami, FL	Add
			Remove
			☐ Change
MGR	Moises Guevara	15453 SW 143 Terrace, Miami, FL	Add
			Remove
			□
			OF Add
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fective date, if other than the date of filing:  m effective date is listed, the date must be specific and cannot be prior to date.	(optional)	05.030
ote: If the date inserted in this block does not meet the applicable	e statutory filing requirements, this date will not be li	sted a
cument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not ar	n effective time, at 12:01 a.m. on the ear	lier d
The 90th day after the record is filed.		
, November 29 2016		
nted		
Dayle Marie		
Y YYM (1111 - 11/1/11/11/11/11/11/11/11/11/11/11/11/1		

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Typed or printed name of signee

Filing Fee: \$25.00