## 1170000 2Z4Z1

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MA	AIL
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	
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THE MEDIA

## COVER LETTER ,

TO:	Registration Se Division of Cor			
	Callyssee L	LC		
SUBJI	EC1:	Name of Lim	ited Liability Company	
The en	nclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Shay Segev		
			Name of Person	<del></del>
		Callyssee LLC		
			Firm/Company	
		15767 NW 16 CT		
			Address	
		Miami Gardens FL 33169	<b>)</b>	
			City/State and Zip Code	
		sharon@uhicosmetics.com		
		E-mail address: (	to be used for future annual report notif	ication)
For fa	rther information e	oncerning this matter, please ca	all:	
Sharo	อเา		305 6279370	
	Name o	f Person	at () Area Code Daytime	: Telephone Number
Enclos	sed is a check for th	ne following amount:		
□ \$2	25,00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clitton Building
2061 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Callyssee LLC

company has been notified in writing of this change.

FILED

(Name of the Limited Liability Compa (A Florida Limited	inv as it now appears on ou	r records.)	
		-5919 MAT 211	P 3:22
The Articles of Organization for this Limited Liability Company	were filed on $\frac{01/27/201}{}$	<del>7</del>	and assigned
Florida document number 1.17000022421		ALLAHASUL	ฮ์. คนับสเอให
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designati	on "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	1400 Alton Road		
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach FL 3313	9	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o	Can address on our	racarde antar	the name of the ne
registered agent and/or the new registered office address her		records, <u>cinci</u>	the name or the hy
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida stre		
	,,	, Florida	Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>.</u>		
Thereby accept the appointment as registered agent and agr	ree to act in this capaci	ity. I further ag	rev to comply with th
provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	provided for in Chapte	r 605. F.S. Or.	if this document is
being filed to merely reflect a change in the registered office	address. Thereby con	firm that the lir	nited liability

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 **Type of Action** <u>Address</u> Title Name DbA 🔲 \_\_\_\_\_ □ Change \_\_\_\_\_ □ Change ☐ Change \_\_\_\_ Remove \_□ Change \_□ Remove \_□ Change \_□ Add \_□ Remove \_\_\_\_\_ Change

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ective date, if other than the effective date is listed, the date m	e date of filing: _		F Clima na arometha	(optional)	issuant to 605 0
te: If the date inserted in this	block does not meet	the applicable s	tatutory filing requ	rements, this date wi	ll not be listed
rument's effective date on the	Department of State	's records.			
		L	affactive time	at 12:01 a.m. on	the earlier
record specifies a delay The 90th day after the re	ed effective date cord is filed.	e, put not an	enective time,	at 12.01 a.m. ur	the eather
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ted May 13.		019		<del>}</del> .	
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	Signature of a mem	han on authorized	managamentic a of a	いいけんで	

Page 3 of 3

Filing Fee: \$25.00