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COVER LETTÉR

Division of Cor	porations *		
	RS REPUBLIC LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Paul Aiello		
		Name of Person	
	Bennett Aiello		
		Firm/Company	
	Ingraham Building, Eighth	Floor, 25 S.E. 2nd Avenue	
		Address	
	Miami, Florida 33131		17 FEB 24 PM 2: 4.5
	***************************************	City/State and Zip Code	82
	carloshiller90@gmail.com		
		to be used for future annual report notific	ation)
For further information c	oncerning this matter, please ca	all:	۱۳. پیم
Paul Aiello		305 358-9011 at ()	
Name o	f Person	Area Code Daytime T	Clephone Number
Enclosed is a check for the	he following amount:		
□ \$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:

TO:

Registration Section

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

INTERIORS REPUBLIC, LLC		
(<u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appears on our rec da Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Florida document number L17000027448		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	, , ,
Enter new mailing address, if applicable:		1 FE 2 SS
(Mailing address MAY BE A POST OFFICE BOX)		न् भिन्
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B. If amending the registered agent and/or regregistered agent and/or the new registered office ad-		5
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street add	dress
		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 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	Adriana Lemmen Meyer Antillon	5401 Collins Avenue, Unit # CU9	
		Miami Beach, Florida 33140	□ Remove
			☐ Change
AMBR	Carlos Enrique Hiller Sanchez	5401 Collins Avenue, Unit # CU9	
		Miami Beach, Florida 33140	□ Remove
			☐ Change
			□ Add → S
			Remove 2
			Change Change Add S
			□ Remove
			☐ Change
			Remove
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			□ Remove
			□ Change

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	24 PH 2:
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicable ocument's effective date on the Department of State's records.	(optional) late of filing or more than 90 days after filing.) Pursuant to 605.020
e record specifies a delayed effective date, but not a The 90th day after the record is filed.	n effective time, at 12:01 a.m. on the earlier o
ated February 14 2017	<u>!</u>
I III	
The state of the s	

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Filing Fee: \$25.00