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October 17, 2018

NORBERTO NAVARRO PO BOX 22356 WEST PALM BCH, FL 33416

SUBJECT: EXQUISITE WORKS LLC

Ref. Number: L17000048079

We have received your document for EXQUISITE WORKS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 318A00021224

Octavia L Simmons Regulatory Specialist III

7.1 030 B.



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: EXQUISITE WOTLS, UC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Norberto Navarro
Exquisite world, LLC
10 Box 22356
WPB FC 33416
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Name o
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32304

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Examsite	e Works, L	LC
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our re- imited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Co	mpany were filed on 03 C	1 201 Tund assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "	ELC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	<u></u>	
		<u></u>
		
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·	
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office addr	ered office address on our rec ess <u>here</u> :	ords, <u>enter the name of the nev</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	ddress
		, Florida
	Cin [,]	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>	Name	Address	Type of Action
csickent	Norberto	10 Bay 2356	<u>Ø</u> Add
AMBR	Navarro	WPB, fi 33416	□ Remove
			Change
			- <u>-</u> □ Remove
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			D.Ądd
			12 12 12 Remove 20
			□ Change
			Change
			□ Remove
			□ Change
			□ Add
			🗆 Remove
			Change

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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and caote: If the date inserted in this block does not mecocument's effective date on the Department of Stat	nnot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020° a the applicable statutory filing requirements, this date will not be listed as
e record specifies a delayed effective dat The 90th day after the record is filed.	e, but not an effective time, at 12:01 a.m. on the earlier o
ated Sept 1.	2018
Marta	mber or authorized representative of a member
Signature of a me	most of administrative representative in a member

Page 3 of 3

Filing Fee: \$25.00