

L17000116634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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2017 JUN 23 PM 3:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K SALY

JUN 27 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LV Lounge
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:

Layla Lavie
Name of Person

Firm/Company

225 Iowa Ave Apt. 5
Address

Fort. Lauderdale FL 33312
City/State and Zip Code

Lavie lounge7@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frantz Charles at (786) 307-9008
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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, 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

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2017 JUN 23 PM 3:49
CLERK OF STATE
TALLAHASSEE, FLORIDA

LU Lounge

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05-26-2017 and assigned
Florida document number L17000116634.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited 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 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 on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter 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 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>	<u>Address</u>	<u>Type of Action</u>
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AmBR	Layla Lavie	229 FOWA AVE APT-5	<input checked="" type="checkbox"/> Add
		Fort Lauderdale FL 33312	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

AmBR	Frantz Charles	229 IOWA AVE APT-5	<input type="checkbox"/> Add
		Fort Lauderdale FL 33312	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change

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CLERK OF DISTRICT COURT
MALLAMASSETT, MASSACHUSETTS

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

(b) The 90th day after the record is filed.

Dated 06-20, 2017

Signature of a member n

Signature of a member or authorized representative of a member

Frantz Charles

Typed or printed name of signee