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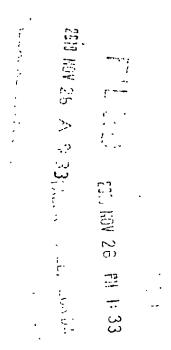
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer	

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CAPITAL CONNECTION, INC.

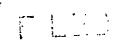
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ANKAS LLC				
			1	
				
			l	Art of Inc. File
 		<u></u>	1	LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
			<u> </u>	Art, of Amend, File
			\	RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
			1	Photo Copy
				Certificate of Good Standing
			✓	Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
Requested by: BA	11/26/19			UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
Name	Date	Time		UCC Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

	sistration Section ision of Corporation	15		
SUBJECT:	ANKAS LLC			
301011		Name of Limited	Liability Compan	y
The enclosed	l Articles of Amendm	ent and fee(s) are submitt	ed for filing.	
Please return	all correspondence o	oncerning this matter to th	e following:	
	EM	ANUELLE OLIVEIR		
	<u> </u>		Name of Person	1
	CSC	CAPITAL SERVIC	ES GROUP	PINC
			Firm/Company	
	<u>119</u>	1 E NEWPORT CEI		E SUITE 103
			Address	
	DE	RFIELD BCH, FL 3		
		-	ty/State and Zip C	•
	EMA	NUELLE@THEWA	YGROUP.B	<u>Z</u>
		E-mail address: (to be	used for future an	nual report notification)
For further in	formation concerning	this matter, please call:		
EMMA			at (954.427.4770
	Name of Person		Area Code	Daytime Telephone Number

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ANKAS LLC	2813 NOV 21	h <u>A 9:33</u>
(Name of the Limited Liability Compa	ny as it new appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 06/08/2017	and assigned
Florida document number L17000125217		
This amendment is submitted to amend the following:	_	
A. If amending name, enter the new name of the limited liab	lity company here:	
THE FASHIONIST GROUP LLC The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	he abbreviation "L.L.C."
The new name must be distinguishable and contain the words Elimical Classic	2598 E SUNRISE BLVD SI	UITE 2104
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE, FL	33304
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	2598 E SUNRISE BLVD SI FORT LAUDERDALE, FL	33304
B. If amending the registered agent; and/or registered office a agent and/or the new registered office address here:	iddress on our records, <u>enter the</u>	name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florid	
	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
AMBR	GUSTAVO GADILE	4325 HUNTER ST 1904	ØAdd
		NEW YORK, NY 11101	Remove
			Change
AMBR	SIMONE MINEIA DE OLIVEIRA	2598 E SUNRISE BLVD SUITE 2104	□Add
		FORT LAUDERDALE, FL 33304	□Remove
AMBR	ELDO UMBELINO	2598 E SUNRISE BLVD SUITE 2104	🗆 Add
		FORT LAUDERDALE, FL 33304	Remove
			☑Change
			🗆 Add
			□Remove
			Change
			□Remove
			□ Change
			□ Add
			□Remove
			Change

Page 2 of 3

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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•	
•	
•	
Note:	(optional) ective 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)(i) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
f the red b) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	NOVEMBER 20TH , 2019
	Signature of a member or authorized representative of a member
	SIMONE MINEIA DE OLIVEIRA
	Typed or printed name of signee