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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: GIZMO And Glamow LLC  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:
Driviel U. St Juste III. Name of Person
GIZMO FIND GLAMOUR LLC Firm/Company
17001 NE 13+4 AUE APT 101 Address
NORTH MILMI BCH FL 83167  City/State and Zip Code  GIZ MAND GID DOMNIE (Q) C MICHI COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Daniel St Tuste at (86) 602 9053  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$\Bigcup \$60.00 Filing Fee, 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

	NDGLAMI Linbility Company as Florida Limited Liabil		LLC pents on our records.	)	<del></del>	
The Articles of Organization for this Limited Lial		e filed on	460 70,	2010 an	d assigned	
Florida document number <u>L1300004573</u>	39					
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited liability	company	<u>/ here</u> :			
GIZMO AND	GLAMO	UR	LLC			
The new name must be distinguishable and contain the wor	ds "Limited Liability C	ompany," tl	ne designation "LLC"	or the abbreviation	m "L L.C."	
Enter new principal offices address, if applical	ole:					
(Principal office address MUST BE A STREET	ADDRESS)			<del> </del>		
	_					
Enter new mailing address, if applicable:					<del></del>	
(Mailing address MAY BE A POST OFFICE Be	<u> </u>					
	_					
B. If amending the registered agent and/or registered agent and/or the new registered officers.		address	on our records,	enter the na	Tipe of the n	<u>еи</u> .
					HA.	-
Name of New Registered Agent:	Danvel	St	Juste	# S		
New Registered Office Address:				77 5		<u>ה</u>
		Enter 1	Florida street address	ORIGINAL	12:	)
	-	City	, Flor	ida <u></u>	ode	

## 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.

f Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records:</u>

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name C	Address	Type of Action
MGR	Drunel St Juste	17001 NE 13th AVE apt 101 MIRMI FL 33162	DAdd
			☐ Remove
	<b>6</b> .		Change
AMBR	Daniel St Jude	17001 NE 13+11 AVE APT 101 MIAMI FL 33162	Add
			□ Remove
		<del></del>	Change
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			Change
	<del></del>	<del></del>	□ Add
			_□ Remove
			□ Change

	<u> </u>	
Effective date, if other than the date of filing:  (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.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste locument's effective date on the Department of State's records.  The 90th day after the record is filed.		
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Signature of a member of authorized representative of a member		A3: //
Signature of a member or authorized representative of a member		) (o)
. //	sentative of a member	Signature of a member or author

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Filing Fee: \$25.00