L18000 200314

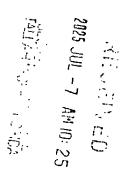
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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CT CORP

(850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

07/07/2025

Date:

4: DW

		Acc#I20160000072	
Name:	THE SKINNY	DIP: PALM BEACH	EDITION LLC
Document #:			
Order #:	16401654		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🗸	Certified: Plain: COGS:		Email Address for Annual Report Notifications
Availability Document Examiner Updater Verifier W.P. Verifier	Amount: \$	55.00	

Thank you!

COVER LETTER

	ision of Corp			
20110 HPZ2T			ON LLC	
SUBJECT:		Name of Limit	ed Liability Company	
The enclosed	l Articles of A	Amendment and fee(s) are subn	nitted for tiling.	
Please return	all correspon	ndence concerning this matter t	o the following:	
		Jennifer Dorris		
			Name of Person	
		THE SKINNY DIP: PALM	BEACH EDITION LLC	
			Firm/Company	_
		217 Royal Poinciana Way		_
	THE SKINNY DIP: PALM BEACH EDITION LLC Firm/Company 217 Royal Poinciana Way Address Palm Beach, FL 33480 City/State and Zip Code jennifer@shopthedip.com E-mail address: (to be used for future annual report notification) her information concerning this matter, please call: Dortis 1 217 Page 1 2923-1864 Area Code Daytime Telephone Number d is a check for the following amount: Coo Filing Fee Searchificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Mailing Address: Registration Section Registration Section			
		Palm Beach, FI. 33480		
			City/State and Zip Code	
				nouncation
For further i	nformation c	oncerning this matter, please ca		
Jennifer Do	rris			
	Name o	f Person	Area Code Day	rtime Telephone Number
Enclosed is	a check for the	ne following amount:		
□ \$25.00	Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Re	egistration		Registration Division of	Section Corporations
Ρ.	O. Box 631 allahassee.	27		of Tallahassee nroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT **ARTIC**

TO CLES OF ORGANIZATION OF	2025 JU 7 50
DITION LLC	
Liability Company as it now appears on our records.) Florida Limited Liability Company)	

THE SKINNY DIP: PALM BEACI	H EDITION LLC	_	
(Name of the Limit	ed Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	·
ne Articles of Organization for this Limited L	iability Company were filed on $\frac{08/2}{}$	1/2018 and a	assigned
orida document number 1.18000200374			
orida document number	·		
is amendment is submitted to amend the foll	owing:		
If amending name, enter the new name of	f the limited liability company her	<u>e</u> :	
ne new name must be distinguishable and contain the v	words "Limited Liability Company," the de-	signation "LLC" or the abbreviation	"L.L.C."
nter new principal offices address, if applic	cable:		
rincipal office address MUST BE A STREI	ET ADDRESS)		
nter new mailing address, if applicable:			<u> </u>
Mailing address MAY BE A POST OFFICE	(BOX)		
The state of the s	 _		
3. If amending the registered agent and/or	manistared office address on our re	cords, enter the name of the	new registe
s. If amending the registered agent and/or gent and/or the new registered office addro	registered office address on our re		
gent and/or the new registered office accur-			
	Jennifer Dorris		
Name of New Registered Agent:			
New Registered Office Address:	217 Royal Poinciana Way		
THE WINDS OF THE PARTY OF THE P	Enter Flor	da street address	
	Palm Beach	, Florida 33480	
	City	Zip Co	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.

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
Owner	Jennifer Dorris	217 Royal Poincana Way	⊠Add
		Palm Beach, FL 33480	□Remove
		1551 N. Flagler Drive APT 1204	⊐a!
Owner	Taylor Ivey	West Palm Beach, F1, 33401	□ Add
			⊠Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Add
			□Remove
			□Change

f amending any other info	rmation, enter change	e(s) here: (Attac	h additional she	ets, if necessary.)	
				<u> </u>	
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	 	. <u></u>			
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			<u> </u>		
Effective date, if other than if an effective date is listed, the date. Note: If the date inserted in the document's effective date on the second sec	his block does not meet t	ine applicable stat	f filing or more than utory filing requi	(optional) 90 days after filing.) Prements, this date w	ursuant to 605.0207 ill not be listed as
e record specifies a delayed ef rd is filed.	fective date, but not an e	ffective time, at 1	2:01 a.m. on the o	earlier of: (b) The '	90th day after the
Dated					
16-	7 0				
- 10	Signature of a memb	ber or authorized re	presentative of a mo	mber	

Filing Fee: \$25.00