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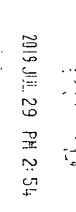
(Re	questor's Name)	_
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Special Instructions to	Filing Officer:	





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## COVER LETTER ...

Division of Corporations			
SUBJECT: Cuter Than You, 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:			
Michael Lamas Name of Person			
- Cuter Than you Firm/Company			
s 5301 N Kendall Dr Address			
Miami, FL 33156 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Michael Lanas at (305) 335 - 3013 Name of Person Area Code Daytime Telephone Number			
Enclosed is a check for the following amount:			
Certificate of Status Certified Copy Certificate of Status &  (additional copy is enclosed) Certified Copy  (additional copy is enclosed)  (additional copy is enclosed)			
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

TO:

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cuter Than You, LLC

2019 JUL 29 PM 2:53

(Name of the Limited	d Liability Company as it now appears on o A Florida Limited Liability Company)	ur records.)	
,		, .	
The Articles of Organization for this Limited Lia	bility Company were filed on	and assigned	
Florida document number	<u></u>		
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of the	the limited liability company here:	11:09 58	
A. If amending name, enter the new name of the contain the work of the new name must be distinguishable and contain the work of the new principal offices address, if applications and contain the work of the new principal offices address, if applications are contained to the contained of the new principal offices address.	Limited Liability Comp	Dany (* between t	
he new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applica	ble:		
Principal office address MUST BE A STREET	ADDRESS)		
	<u></u>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE B			
	<del></del>		
B. If amending the registered agent and/o	r registered office address on our	records, enter the name of the r	
egistered agent and/or the new registered off	ice address here:		
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida str	reet address	
		, Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Re			
hereby accept the appointment as registered		city. I further navge to comply with	
t hereby accept the appointment as registered provisions of all statutes relative to the prope	=		

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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	Tessia Dimitrion	2300 SW 13th St	
		Miami, FL 33145	<b>™</b> Remove
			☐ Change
	Mabel Lamas	5301 N Kendall Dr	M Add
		Miami, FL 33156	Remove
			Change
			□ Remove
			Change
			🗆 Add
			🗖 Remove
			🗆 Change
			Add
		□ Remove	
		Change	
			□ Remove
			☐ Change

II auit	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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Note:	ive date, if other than the date of filing:
	cord 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	July 20. 2019.
	Signature of a member of authorized representative of a member
	Signature of a member of authorized representative of a member
	Michael Lamas Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00