L19000050912

(Re	questor's Name)	
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PICK-UP	☐ WAIT	☐ MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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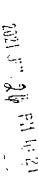
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07/17/21--01032--011 **25.00

07/27/21--01023--027 **25.00



7/22/12



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED
2021 JUL 26 PM 2: 35

June 21, 2021

ANISHA TOOMER 1016 FOSTER RD. HALLANDALE BEACH, FL 33009

SUBJECT: ADMIRE ZANY APARREL LLC

Ref. Number: L19000050912

We have received your document for ADMIRE ZANY APARREL LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers Regulatory Specialist II

Letter Number: 621A00013932

www.sunbiz.org

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	
	Name of Limited Liability Company
The end	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Anisha Towner Name of Person
	Adnive Zary Apparel WC
	1016 FOS. Rel Rd
	Hallandale Beach Fl 33009
	E-mail address: (to be used for future annual Jeport notification)
For fur	ther information concerning this matter, please call:
	Anisha Tomer at (808) 372 0615 Area Code Daytime Telephone Number
	Maine of Person Area Code Daytine Telephone Number
Enclose	ed is a check for the following amount:
€ S2:	5.00 Filing Fee \$\Bigsigma\$ \$30.00 Filing Fee & \Bigsigma\$ \$55.00 Filing Fee & \Bigsigma\$ \$Certificate of Status & \Bigsigma\$ Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Admire Zany A	parvel LLC
(Name of the Limited Liability Company as it now appears o (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 2 Florida document number 290055912	$\frac{120}{209}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here Amile Zon Amore The new name must be distinguishable and contain the words "Limited Liability Company," the design	arel UC
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) (Principal office address MUST BE A STREET ADDRESS)	S palm AVE Stute 10 W FL 33005
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Continue of the second of	Foster Rd.
B. If amending the registered agent and/or registered office address on our receagent and/or the new registered office address here:	ords, enter the namé of the new registered
Name of New Registered Agent: New Registered Office Address:	PH
	i sweet address
	, Florida

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>	Name	Address	Type of Action
MGR	Anisha Toomer	1016 Foster Rd Halanke Beach 12 33	∂ □Add
		·	□Remove
		41114	Change
			□Add
			□Remove
		77-272-171-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	□Change
		P-11-7-1-1	□Add
			□Remove
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<u>e:</u> If the da	, if other than to is listed, the date interested in this ective date on the	s block does no	t meet the appl	icable statutor	ng or more than S y filing require	(option: 0 days after fili ments, this da	al) ng.} Pursuant to 60 ntc will not be lis)5.020 sted a
cord specific s filed.	rs a delayed effec	ctive date, but n	iot an effective	time, at 12:01	a.m. on the eq	rlier of; (b)	The 90th day afte	er the
ed	7/14		. 202	<u>-1</u>	-luc			
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Filing Fee: \$25.00