

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet  
**L19000055ZL**

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : CORPORATE CREATIONS INTERNATIONAL INC  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)214-8442

STATE  
ALLAHASSEE, FLORIDA  
2021 SEP 10 PM 1:07  
PM EDT

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ASG.NODACHI, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

SEP 13 2021  
S. PRATHER

2021 SEP 10 PM 3:16  
STATE  
ALLAHASSEE, FLORIDA

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ASG.NODACHI, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2021 SEP 10 PM 1:07  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/05/2019 and assigned  
Florida document number L19000055526.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

ATTIRE.COM LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

328 Crandon Blvd. Ste. 119-350

**(Principal office address MUST BE A STREET ADDRESS)**

Key Biscayne, FL 33149

**Enter new mailing address, if applicable:**

328 Crandon Blvd. Ste. 119-350

**(Mailing address MAY BE A POST OFFICE BOX)**

Key Biscayne, FL 33149

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

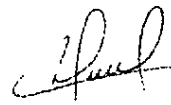
Name of New Registered Agent: Corporate Creations Network Inc.

New Registered Office Address: 801 US Highway 1  
*Enter Florida street address*

North Palm Beach, Florida 33408  
*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.*

Carlos M Alvarez, Special Secretary   
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>	<u>Address</u>	<u>Type of Action</u>
MGR	WEALTHTREE HOLDINGS LLC	328 Crandon Blvd. Ste. 119-350	<input checked="" type="checkbox"/> Add
		Key Biscayne, FL 33149	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BATHTOWELS HOLDINGS, LLC	260 CRANDON BLVD., #32-98	<input type="checkbox"/> Add
		KEY BISCAYNE, FL 33149	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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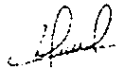
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

*(If 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 605.0207 (3)(b)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated September 9th, 2021



Signature of a member or authorized representative of a member

Carlos M Alvarez, Attorney-in-Fact

Typed or printed name of signee

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

2021 SEP 10 PM 1:07

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