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(Requestor's Name)
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COVER LETTER

ABSOLUT	ELY MODISH, LLC		
50bjec1;	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	indence concerning this matter t	to the following:	
	ANNEDE SAINTIL		
		Name of Person	
		Firm/Company	
	350 W DAYTON CIR		
	FORT LAUDERDALE, FL	Address 2 33312	
	ANNEDESAINTIL26@GM		
	E-mail address: (t	o be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	ill:	
ANNEDE SAINTIL		954 681-2970 at ()	
Name c	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000072082</u>	were filed on MARCH 14, 2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
SOIGNE LUXE, LLC		3
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the a	obreviation "L.L.C."
Enter new principal offices address, if applicable:	350 W DAYTON CIR	
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE, FL 33312	ن
Frincipal Office duarens 91031 DL A 31 KELL 1 ADDICESS		F
Enter new mailing address, if applicable:	350 W DAYTON CIR	بن بن
(Mailing address MAY BE A POST OFFICE BOX)	FORT LAUDERDALE, FL 33312	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:		the name of th
	, Florida	
· · · · · · · · · · · · · · · · · · ·	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

ADCOLUTELY MODICH LLC

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
			Remove
			· □ Change
			Add
			Remove
			Change
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f an ef 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.
)ated	August 28th 2019 Annede Saint Singular of a member of
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00