## 119000114250

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Enuty Name)
(Document Number)
Certified Copies Certificates of Status
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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

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## **COVER LETTER**

SUBJECT: _	TRENDS BY	Name of Lim	ited Liability Company		
		Name of Lim	ited Liability Company		
	Articles of A				
The enclosed a		mendment and fee(s) are sub-	mitted for filing.		
Please return a	II correspond	dence concerning this matter	to the following:		
		DOROTI MOSSA			
		TRENDS BY DM LLC	Name of Person		<del></del>
		7601 EAST TREASURE I	Firm/Company DRIVE APT 1402		
		MIAMI FL 33141	Address		
		TRENDSBYDM@GMAIL.	City/State and Zip Code .COM		
F . 2			to be used for future annual rep	port notification)	
DOROTI MO		ecerning this matter, please co	305 8331	515	
	Name of I	Person	at () Area Code	Daytime Telepho	one Number
Enclosed is a c	theck for the	following amount:			
■ \$25.00 Fil	ing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy tadditional copy is enclos		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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**

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company has been notified in writing of this change.

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

(A Florida Limited L	iability Company)	<u>,,</u>
The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.19000114250}{1.19000114250}$ .	were filed on 04/26/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		SEC 3
		- Se & Th
		(SS)
Enter new mailing address, if applicable:		<del></del>
(Mailing address MAY BE A POST OFFICE BOX)		
	····	<u> </u>
B. If amending the registered agent and/or registered off	fine addrags on our regar	512 20
registered agent and/or the new registered office address here		us, enter the name of the i
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	en
	, <u> </u>	loridaZip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete ;	• • •	

If Changing Registered Agent, Signature of New Registered Agent

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

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
MGR	ANDREA SENIS	7601 EAST TREASURE DRIVE APT 1402	<b>=</b> Add
		MIAMI FL 33141	
			Remove
			□ Change
			□ Add
			Remove
			SSEE PLONIDA CONTROL C
			Change
			Add
			□ Remove
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			☐ Change
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If an effective d <u>Note:</u> If the c	te, if other that is listed, the date inscrited in ffective date of the control o	date must be in this block	specific and does not n	cannot be neet the a	prior to date pplicable s	e of filing o	r more than ling requir	(optic 90 days after ements, this	onaf) filing.) Pursu	ant to 60 of be lis	5.0207 (1 ted as th
	pecifies a c day after t			late, bu	t not an	effectiv	e time, a	t 12:01 a	.m. on th	e earl	ier of:
Dated	1	ove 1	11/2	. 20	19						
	1 -		<i>el</i> 8								
	· #		nature of a r	member or	authorized	tenresento	ive of a me	nher			

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Filing Fee: \$25.00