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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

28 _ Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GIADORE COLLECTION LLC

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GIADORE COLLECTION LLC	282
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our records.) Liability Company) Vivore filed on 10/17/19
The Articles of Organization for this Limited Liability Compan	10/17/10
Florida document number L19000261535	y were filed on 10/17/19 and assigned
This amendment is submitted to amend the following:	y were filed on 10/17/19 and assigned assigned
A. If amending name, enter the new name of the limited liah	ility community
TOUCHEUDVIINARE LLC	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the obbasis is
and principal offices address, if applicable:	Samuel Bite of the appreviation "L.I.C."
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing add	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	dress on our records ont and
agent and/or the new registered office address here:	on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code
the recement 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 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
			□Add
			□Remove
			Change
			□Add
			□Remove
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C. Effective date, if other than to (If an effective date is listed, the date is <u>Note:</u> If the date inserted in this document's effective date on the	nust be specific and cannot be prior to date of filing or more than 90 c block does not meet the applicable statutory filing requirem	_ (optional) days after filing.) Pursuant to 605.0207 (3)(t ents, this date will not be listed as the
f the record specifies a delayed effect ecord is filed.	tive date, but not an effective time, at 12:01 a.m. on the earli	er of: (b) The 90th day after the
Dated 01/07	. 2022	
(Y) one	Signature of a member or authorized representative of a member	or and the second secon
Morgan No		
<u> </u>	Typed or printed name of signee	

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