

L19000303851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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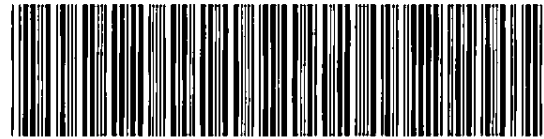
(Business Entity Name)

(Document Number)

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MAR 17 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LINK'D THE LABEL LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDREA OCEJO MORENO

Name of Person

LINK'D THE LABEL LLC

Firm/Company

1549 SAN RAFAEL AVE

Address

ORAL HABEES, FL 33134

City/State and Zip Code

shoplinkd@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrea Ocejo Moreno

Name of Person

at ( 305 )

Area Code

498 0022

Daytime Telephone Number

Enclosed is a check for the 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  
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**

LINK'D THE LABEL LLC

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

The Articles of Organization for this Limited Liability Company were filed on December 13, 2019 and assigned  
Florida document number L19000303851

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

151 crandon blvd Apt 838  
key Biscayne, FL 33149

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

144312 LORAL GABLES  
FL 33114-4312

**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:

Andrea Ochoa Moreno

New Registered Office Address:

151 crandon blvd apt 838

*Enter Florida street address*

key Biscayne, Florida 33149  
*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.*

*A. L. Pina*

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>
AMBR	Andrea Oceyo Moreno	1549 SAN RAFAEL AVE	<input checked="" type="checkbox"/> Add
		coral Gables, FL 33134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Carla Cavalcanti	460 NE 28 Street Apt. 1507	<input checked="" type="checkbox"/> Add
		Miami, FL, 33137	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRET  
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED  
DATE 08-01-2010 BY 60322 UCBAW/PL

SECRET  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 01-11-2001 BY 60322 UCBAW/STP/PL

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.

Donna Mante  
Signature of a member or authorized representative of a member

Teresa Lorena Moreno Martin Del Campo  
Typed or printed name of signee