L20000 152307

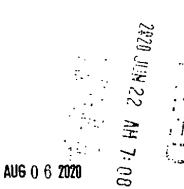
(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
-
Special Instructions to Filing Officer:





100346089751

06/23/20--01011--026 **55.00 FITCFIVED JUN 2.2 220



S. YOUNG

COVER LETTER

Division of Cor	porations	•			
(No.	II and Stil	Ulda: < 11 ()			
SUBJECT:	Name of Lin	ited Liability Company	<u> </u>		
The enclosed Articles of	Amendment and feets) are sub	mitted for filing			
Please return all correspo	ondence concerning this matter	to the following:			
	14/455, 1-C	<u>Kuris</u>			
	ed Articles of Amendment and feets) are submitted for filling. In all correspondence concerning this matter to the following: Alggy Firm/Company 1450 Villa Cayri Cir (with 318) Address CRSS FL 3355 C City/State and Zip Code City/State and City Company information concerning this matter, please call: Name of Person at (
		Firm/Company			
	ME: NO	0 . 0 .			
	1930 VIIIG	Capri Cir. (11)	17 316		
	COPSYL IF	L 3355 cr			
		City/State and Zip Code			
	Clausandst	VPHOSIN UMail	·com_		
	E-mail address: (to be used for future annual report no	tification)		
For further information c	oncerning this matter, please c	all:			
Name o	f Person	at () Area Code Daytir	ne Telephone Number		
		, wew sawe			
Enclosed is a check for the	he following amount:				
☐ \$25.00 Filing Fee	-				
	Certificate of Status				
			(additional copy is enclosed)		
Mailing Addres	·×•	Street Address:			
Registration Section		Registration Section			
Division of C	forporations	Division of Co	rporations		
P.O. Box 632	27	The Centre of Tallahassee			

Tallahassee, FL 32314

TO:

Registration Section

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

55

Claux and	Stilettos LLC	
(Name of the Limit	ed Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Li Florida document number <u>L2Ccoc152</u> This amendment is submitted to amend the follo	307	ne 3, 2020 and assigned =
A. If amending name, enter the new name of	f the limited liability company here:	
The new name must be distinguishable and contain the w		ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic		
(Principal office address MUST BE A STREE	<u>TADDRESS)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>ΒΟλ)</u>	
B. If amending the registered agent and/or r agent and/or the new registered office addres	**	ds, enter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida s	reet address
	City	Florida Zip Code
	, ap	rep service

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 a 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 ador removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Manager	Alyssa Adams	1450 vilv. Capri Cir Unit ?	5 <u>18</u>) (316
		Odessa, FL 3355co	□Remove
			□Change
Marager	Canaith Khder	1450 villa Capri Cir.	□Add
		Linit 318	Nemove
		orlessa FL 33556	□Change
			🗀 Add
			□Remove
			□Change
			□Add
			🗀 Remove
			□Change
			□Add
			🗆 Remove
			□Change
			□Add
			□Remove
			🗆 Change

		-						
							····-	
						· · · · · · · · · · · · · · · · · · ·		
								
								
		•						
· -		<u> </u>						
If an effective date is Note: If the date	f other than the distinct the date must linserted in this blockive date on the Dep	be specific a ck does not	ind cannot be p t meet the ap	plicable statut	iling or more than ory filing requi	optiona 190 days after filir rements, this da	g.) Pursuant to 605.0)207 d as
e record specifies : rd is filed.	a delayed effective	date, but n	ot an effectiv	ve time, at 12:	01 a.m. on the	earlier of: (b)	The 90th day after	the
Dated <u>JUNA</u>	18		<u>. Дод</u>	<u>O</u> .				
	(there	یار) ہ	lans		sentative of a me			
		ignature of	a member or :	uthorized repri	sentative of a mi	ember		

Filing Fee: \$25.00