

KZ1000114247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

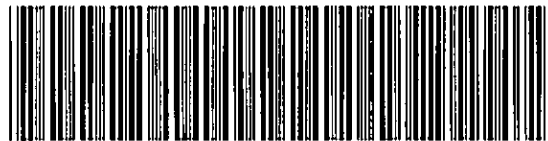
(Business Entity Name)

(Document Number)

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2021 MAY 25 PM 1:43
TALLAHASSEE, FLORIDA
STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Collection Boutique Miami 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:

Nataly Izquierdo
Name of Person

The Collection Boutique Miami LLC
Firm/Company

20080 NW 77th Path
Address

Maleah, FL 33015
City/State and Zip Code

TheCollectionMia@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nataly Izquierdo at (786) 780-3444
Name of Person Area Code 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

The Collection Boutique Miami LLC

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

Title	Name	Address	Type of Action
MGR	Melanie Marie Hernandez	Add a Last name After current Last name Of Hernandez, please add "Avila" should now appear as "Hernandez-Avila"	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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STATE

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

We are filing out this amendment because we need to add a secondary last name to our Authorized member. Her name comes up as Melanie Hernandez we need to add "Avila" After Hernandez as a secondary last name to match her state-issued drivers license. In this Amendment the name now changed to "Melanie Marie Hernandez-Avila" should be the only change we are amending Again just adding a secondary last name

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CLERK
TALLAHASSEE
FLORIDA

E. Effective date, if other than the date of filing: 05/18/21 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated

05/18, 2021



Signature of a member or authorized representative of a member

Nataly Izquierdo

Typed or printed name of signee