

K21 000 177085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

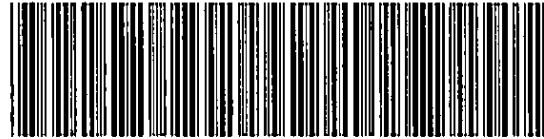
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Q. SILAS

2021 DEC 27

Office Use Only



700378310167

12/27/21--01023--005 ++25.00

SECRETARY OF STATE
FILING

2021 DEC 27 PM 12:50

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C'est La Vie Home Away by Mikes Group 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:

Jordan D. Mikes
Name of Person

C'est La Vie Home Away by Mikes Group LLC
Firm/Company

12323 SW 55th St. Suite 1007
Address

Cooper City, FL, 33330
City/State and Zip Code

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

For further information concerning this matter, please call:

Jordan Mikes at (954) 701-4399
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

C'est La Vie Home Away by Mikes Group LLC 2021 DEC 27 PM 6:50
(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 4/16/21 and assigned
Florida document number L21000177085

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)

12323 SW 55th St Suite 1007
Cooper City, FL 33330

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

12323 SW 55th St Suite 1007
Cooper City, FL 33330

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:

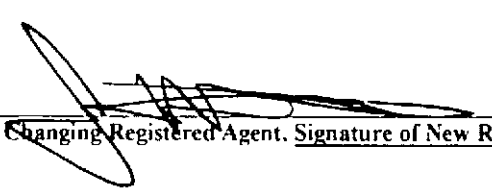
Jordan Mikes

New Registered Office Address:

12323 SW 55th St Suite 1007
Enter Florida street address
Cooper City, Florida 33330
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.


If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

[illegible]

12/16/21

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.

Dated 12/16/21, 12:01 a.m.

Jordan Mikes

Typed or printed name of signee