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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: VOUNE AND LOUKO 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:
LCC MOISE PIERRE Name of Person
Firm/Company
7981 NW 37th DR
7981 NW 37th DR Address Coral Springs F/ 33065 City/State and Eip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LUC MOISE PIERRE at (954) 818 618 3035 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
★\$25.00 Filing Fee

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

VOUNE AND L	ouko	
(<u>Name of the Limited Liability</u> (A Florida	v Company as it now appears Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Co	ompany were filed on	1Ay 6, 2021 and assigned
The Articles of Organization for this Limited Liability Co Florida document number <u>L2/606 3/2760</u>	<u>_</u> .	, , ,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company her	<u>e</u> :
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the de	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our re	cords, enter the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florid	la street address
		Florida
New Registered Agent's Signature, if changing Registered	City	Zip Code
		2
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered ag being filed to merely reflect a change in the registered	omplete performance of r ent as provided for in Ci	ny duties, and I am familiar with and napter 605, F.S. Or, if this document is
company has been notified in writing of this change.	а одное шинель, 1 негену	
		를 변경 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등
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	If Changing Registered Age	nt, 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	MARIE V PROSPE	R 7981 KW 37th DRIV	⊭ X Add
		R 7981 KW 37th DRIV CORAL SPRINGS, FL 330	∡ □Remove
			□Change
			🗆 Add
			□Remove
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fective date, if other meffective date is listed,	r than the date of f the date must be specifi	filing:	o date of filing or more	(optiona than 90 days after tili	d) se) Pursugunt to 605 020
ne: if the date inserte	ed in this block does	not meet the applicat	ole statutory filing r	equirements, this da	te will not be listed a
cument's effective da	te on the Department	t of State's records.			
ecord specifies a delay	ved effective date. bu	it not an effective tie:	wat 12:01 am on	the earlier of the	The OOth day often the
orani aprobanten a delaj	y a directive dute, bu	e not an effective em	ic. at 12.01 a.m. on	the earner or, (o)	The 90th day after the
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is filed.	12	_ 2021	_ ·		
is filed. ued <u>June</u>	12 July	of a member or authori	zed representation of	a member	2021 JULY 17 P.

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