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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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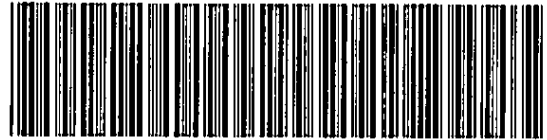
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

CS
7/26/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dynamic Studio units 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:

Wesbertha J. Cherubin
Name of Person

LLC Limited Liability Company
Firm/Company

441 West 35th Street
Address

Biviera Beach, FL 33404
City/State and Zip Code

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

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TALLAHASSEE, FL

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For further information concerning this matter, please call:

Wesbertha J. Cherubin at (561) 542-7109
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 210

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

Dynamic Studio Units 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 June 1st, 2021 and assigned Florida document number L29000250950.

This amendment is submitted to amend the following:

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

"WESS Luxury's LLC"

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)

441 W 35th Street Riviera
Beach FL 33404

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

441 W 35th Street
Riviera Beach FL 33404

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:

Wesbertha T. Cherubini

New Registered Office Address:

441 West 35th Street
Enter Florida street address

Riviera Beach Florida 33404
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.

Wesbertha T. Cherubini

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	Wesbertha T. Chocubin	441 W 35th Street Riviera Beach FL 33404	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Wesbertha T. Chocubin	441 W 35th Street Riviera Beach	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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

CED/Manager; I would like my LLC name
changed; Mailing address;

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TALLAHASSEE, FL

E. Effective date, if other than the date of filing _____ (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 June, 28, 2021 2021



Signature of a member or authorized representative of a member

Wesbortha T. Cherubin

Typed or printed name of signee