Division of Corporations 16/2021

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000310429 3)))



H2100031042934BCVV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Ic:

Division of Corporations

Fax Number : (850)617-5383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000145 Phone : (305)444-4994

Fax Number : (305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EVERYBODY'S FASHION DISTRIBUTORS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	()4
Estimated Charge	\$25.00

2021 AUG 18

Electronic Filing Menu

Corporate Filing Menu

Help

4

From: Yanet Avila

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EVERYBODY'S FASHION DISTRIBUTO	ORS, LLC	
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L21000327275		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Linbility Company," the designation "LLC" or	the abbreviation "L.E.L."
Enter new principal offices address, if applicable:		- G
(Principal office address MUST BE A STREET ADD	DRESS)	co .
(Principal office autress 50031 BE ASTREET (185		
		一一
Enter new mailing address, if applicable:	seems produce and the 40 to 100 Person and to the product of the p	- 33 9
(Mailing address MAY BE A POST OFFICE BOX)		
		اختطبها والمستداد والمستدا
B. If amending the registered agent and/or registered agent and/or the new registered office address here	red office address on our records, <u>enter the</u> <u>e</u> :	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da
_	City , P 101 to	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 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
	AMBRAIGR	MARIA МЕНА	22821 SW 123RD AVENUE	∃Add
			MIAMI, FL 33170	□Remove
,				☐ Change
		A right or management of the depth of the state of the st		CIAdó
				©Remove
				□ Change
,		***************************************		□Add
				[]Renzove
				[] Change
		.,		БАфЈ
				DRemove
				□ Change
i	***************************************			DAdd
			wind all states a many surrous before \$1000 to the state \$100 to the state \$100 to the state of	□Remove
			had marked as a management of the state of t	- Change
		A die fest teste au est est francis des communes à terformation de plus plus au plus de la Commune de	The state of the s	DAdd
				□Remove
				() Change

). If amending any other i	ntarquitas sot	ու բկառաժան և	ere: (Anoch)	additional shee	us, if necessa	rr.)	
). It amending any odivi r	_{धर्म} ास्त्रसम्बद्धाः ।	smarge(s) n	eres immen				
and a speciment of the contract of the contrac		,				······································	
به محید ۱۵ کوبله جو مخیری سید. شد ۱۰ مانیچیدن ویین سید		and the state of t				an to the second of	•
. And .			ره سب بشک درجی پیونورسیاس بسید.				
and the management of the same							
4	O AN APPLE	ادواه چې د د د د د د د د د د د د د د د د د د د	.,				alaman er
		····	p = 100 for the total		<u></u>		
		na, ,				1	
							,ator 4.71 . 4
						· · · · · · · · · · · · · · · · · ·	
						·	
	and the second s			and the up to the total and the same and the		र्जेळ	2
				,		<u> </u>	<u> </u>
							UG -
						; ′	د ح ر
A May 5						- (<u> </u>
Annual Annual Annual III and a second and a second and a second annual A						2000 2000 2000	.04
F. Effective date, if other (If an effective date is listed, th <u>Note:</u> If the date inserted document's effective date	in this block does	not meet me ab	pronote statute	ing or more than 9 ey filing require	(optional 0 days after filin ments, this day	o) w.) Porsumit	io 605.0207 (
If the record specifies a delaye record is filed.	d effective date, bu	it not an effecti	ve time, at 12:0	t a,m, on the co	ulier of (b) *	The 90th da	y after the
Dated AUG 13		2021					
7							
***************************************	Signature	of a member or	nuthorized repres	sentative of a mon	iber		