

L210000421591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

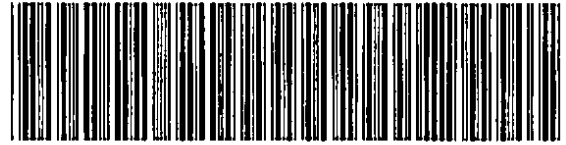
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FILED  
2021 NOV 23 AM 10:00  
SECRETARY OF STATE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WOODY FASHION 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:

Murat Akkemik

Name of Person

Akkemik Consultancy LLC

Firm/Company

11 Spindle CT

Address

Deer Park NY 11729

City/State and Zip Code

murat@akkemik.net

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Suleyman Kocabas

561 465-6662

at ( )

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**

WOODY FASHION 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 09/24/2021 and assigned  
Florida document number 121000421591.

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: 22301 SW 66TH AVE APT 2203

**(Principal office address MUST BE A STREET ADDRESS)** BOCA RATON, FL 33428

Enter new mailing address, if applicable: 22301 SW 66TH AVE APT 2203

**(Mailing address MAY BE A POST OFFICE BOX)** BOCA RATON, FL 33428

**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: Suleyman KOCABAS

New Registered Office Address: 22301 SW 66TH AVE, APT 2203

Enter Florida street address

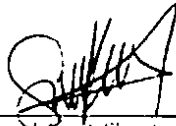
BOCA RATON, Florida 33428

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

SECRETARY OF STATE

2021 NOV 23 AM 10:00

ED

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>                      |
|--------------|-------------------------|-----------------------------|--|
| MGR          | KAAN, Fatih             | 102 W 5 TH ST               | <input type="checkbox"/> Add               |
|              |                         | HALEAH, FL 33010            | <input checked="" type="checkbox"/> Remove |
|              |                         |                             | <input type="checkbox"/> Change            |
| MGR          | CEKCEOGLU, Mehmet Murat | 22301 SW 66TH AVE, APT 2203 | <input checked="" type="checkbox"/> Add    |
|              |                         | BOCA RATON FL 33428         | <input type="checkbox"/> Remove            |
|              |                         |                             | <input type="checkbox"/> Change            |
|              |                         |                             | <input 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               |
|              |                         |                             | <input type="checkbox"/> Remove            |
|              |                         |                             | <input type="checkbox"/> Change            |
|              |                         |                             | <input type="checkbox"/> Add               |
|              |                         |                             | <input type="checkbox"/> Remove            |
|              |                         |                             | <input type="checkbox"/> Change            |

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

E. Effective date, if other than the date of filing: 10/26/2021 (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)  
 Notes: If the date entered in this block is the same as the date of filing, the date of filing must be entered in block 10.

**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 October 28th 2021

Signature of a member or authorized representative of a member

Suleyman KOCABAS

Typed or printed name of signer

**Filing Fee: \$25.00**