121000426018

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A. BUTLER
DEC - 6 2021

. COVER LETTER

Tallahassee, FL 32314

TO: Registration Section of Corp.			
SUBJECT: AON	a Rose Bol Name of Lim	NTIQUE LLC ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	Biridia	ng Jinenez Name of Person	
	Alana Ro	Se BOWtique Firm/Company	LLC
	3160 F	lamingo LN	
	Mulber	City/State and Zip Code	
		DOWTIQUE QQ MIC to be used for Auture annual report noti	
For further information con	cerning this matter, please ca	all:	
Biridiana Name of P		at (813) 720- Area Code Daytim	6 Oll c 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:		Street Address:	
Registration Sec Division of Cor		Registration Sec	
P.O. Box 6327	porations	Division of Cor The Centre of T	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Alang Rose Bowtique 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 28 2021 15 and assigned 28 Florida document number 121000426018.
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)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
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:
New Registered Office Address:
Enter Florida street address
, Florida
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

If Changing Registered Agent, Signature of New Registered Agent

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 adde or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Name</u> Address **Type of Action** Biridiana Jimenez 3160 Flamingo Ln XAdd MGR Mulherry FI 33860

		111101111111111111111111111111111111111	_ = 10011070
			_ □Change
MGR	Yessica Y carreon	3566 Marsh Wren St	_ □∧dd
		Lakeland, Fl 33811	_ DRemove
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Tecti	ve date, if other than the date of filing: (optional)
an effe <u>ote:</u>	ctive 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
ecorc is file	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 ed.
ited _	November 10 2021
	Signature of a member or authorized representative of a member
	()
	Yessica Carreon Typed or printed name of signee