## 121000451863

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600385982686

04/18/22--01038--010 \*\*25.00

SHEER TARY OF STATE OFFICE OF CORPORATION

T. MATTHEWS MAY 23 2022

## **COVER LETTER**

TO: Registration Section
Division of Corporations

	ASHION CLOTHING LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	JAVIER GUZMAN VELA	ASCO	
		Name of Person	
	DIPAOS FASHION CLO	THING LLC	
		Firm/Company	
	19370 COLLINS AVE AF	T 1014	
		Address	
	SUNNY ISLES BEACH.	FL 33160	
		City/State and Zip Code	<del></del>
	USTUEMPRESA@GMAII	COM	
	E-mail address: (	to be used for future annual report not	tification)
For further information of	concerning this matter, please c	all:	
JAVIER GUZMAN VE	LASCO	786 340-0372	
Name o	of Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 633 Tallahassee.	Section Corporations 27	Street Address: Registration So Division of Co The Centre of 2415 N. Monre	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



DIPAOS FASHION CLOTHING LLC

22 APR 18 AH 8: 47

(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 I		were filed on 10/16/2021	and assigned
Florida document number 1,21000451863	,		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liah	pility company here:	
NA			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company." the designation "LL)	C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	NA	
(Principal office address MUST BE A STRE			
			***
		N/A	
Enter new mailing address, if applicable:		NA	
(Mailing address MAY BE A POST OFFICE	(BOX)		<del>-</del>
B. If amending the registered agent and/or agent and/or the new registered office addr		address on our records, <u>ente</u>	r the name of the new registered
Name of New Registered Agent:	NA		
New Registered Office Address:	NA		
		Enter Florida street addre	255
	NA	, F	lorida <sup>NA</sup> Zip Code
		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

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
MGR	LEONARDO I MOLINA GONZA	19370 COLLINS AVE. APT 1014	<b>=</b> Add
		SUNNY ISLES BEACH, FL 33160	□Remove
			□Change
NA	NA NA NA	NA	□Add
			Remove
NA	NA NA NA	NA	🗀 Add
			□Remove
			☐ Change
NA	A NA	NA	
			□Remove
			☐Change
NA ———	NA NA	NA	□Add
			□Remove
			□Change
NA	NA	NA 	□Add
		<del></del>	□Remove
			□ Change

## Page 2 of 3

NA			
		<del></del>	<del></del>
			<del></del>
		, .	
			<u> </u>
· · · · · ·	<del>.</del>		<u> </u>
		·	
		· · · · · · · · · · · · · · · · · · ·	
<u></u> .		······································	
Effective date, if other than the	date of filing: NA		_ (optional)
f an effective date is listed, the date mus	t be specific and cannot be prior to	date of filing or more than 90 di	ays after filing.) Pursuant to 605.0207 (
Note: If the date inserted in this bl document's effective date on the D		le statutory filing requireme	nts, this date will not be listed as t
	•		
ne record specifies a delayed	Leffective date, but not	an effective time, at 1	2:01 a.m. on the earlier of:
The 90th day after the rec			
APRIL 08TH Dated	2022		
Dated APRIL 08TH		•	
		uzman	
	Signature of a prember or authority	uzman Tepresentative of a member	