

9/2/22, 3:32 PM

Division of Corporations

Florida Department of State

L22000008725

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LVM ACCOUNTING SERVICES, INC.
Account Number : I20200000106
Phone : (561)927-7157
Fax Number : (305)912-0167

****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
MI LUNA BOUTIQUE, LLC

Certificate of Status	1
Certified Copy	1
Page Count	07
Estimated Charge	\$60.00

C. BRUMBLEY
SEP 13 2022

FILED

2022 SEP 12 PM 6:07

SECRETARY OF STATE
TALLAHASSEE, FL

2022 SEP 12 PM 2:56

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MI LUNA BOUTIQUE 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:

ANNA GENUT

Name of Person

Firm/Company

7400 ESTERO BLVD UNIT 214

Address

FT MYERS, FL 33931

City/State and Zip Code

annagenut@icloud.com

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

For further information concerning this matter, please call:

ANNA GENUT

404

933-1970

Name of Person

at (_____) _____

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**

MILUNA BOUTIQUE 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 01/03/2022 and assigned Florida document number L22000008725.

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)

26821 SOUTH BAY UNIT 119

BONITA SPRINGS, FL 34134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

26821 SOUTH BAY UNIT 119

BONITA SPRINGS, FL 34134

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:

26821 SOUTH BAY UNIT 119

Enter Florida street address

BONITA SPRINGS

City

Florida

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.

Luma Gettel

If Changing Registered Agent, Signature of New Registered Agent

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 2022 SEP 12 PM 6:07
 CLERK OF STATE
 TALLAHASSEE, FL

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	ANNA GENUT	7400 ESTERO BLVD UNIT 214	<input type="checkbox"/> Add
		FT MYERS, FL 33931	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	FERNANDO A OBALLE	510 AYN COUTR	<input checked="" type="checkbox"/> Add
		ROSWELL, GA 30076	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

Filing Fee: \$25.00