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COVER LETTER

TO: Registration S Division of Co			
LA FLEU	R ROSE BOUTIQUE LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub-	mitted for filing.	
	ondence concerning this matter		
	MARIE VINCENTE BER	nard	
		Name of Person	
	LA FLEUR ROSE BOUT	IQUE LLC	
		Firm/Company	
	9360 NW 33RD AVENUE	:	
		Address	
	MIAMI FLORIDA 33147		
		City/State and Zip Code	
	SASHIE30@HOTMAIL.C	OM to be used for future annual report notif	English .
For further information	concerning this matter, please c		SECT -
MARIE VINCENTE E	BERNARD	305 4171528	Telephone Number
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	the following amount:		STATI E. FL
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	a Section Corporations 327	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro	porations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LA FLEUK ROSE BOUTIQUE LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L22000282821	pility Company were filed on 06/22/2022	_ and assigned
This amendment is submitted to amend the follow	ving:	S
A. If amending name, enter the new name of the	he limited liability company here:	CRETA
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the abbre	
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET.	ADDRESS)	<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or reg agent and/or the new registered office address i	istered office address on our records, <u>enter the name o</u> here:	of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	Zin Coole

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MARIE VINCENTE BERNARD	9360 NW 33RD AVENUE,NORTH MIAI	MLBEACH, ■Add
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Effective date, if other (If an effective date is listed, if Note: If the date inserted document's effective date	e date must be spe in this block do	eific and cannot es not meet th	be prior to date e applicable s	of tiling or more	(opti- than 90 days after quirements, thi	tiling 1 Pursu	ant to 605,0207 of be listed as
the record specifies a delayord is filed.	d effective date.	but not an eff	ective time, a	: 12:01 a.m. on	he earlier of: (t) The 90th	day after the
Dated JULY 26	and Signer	202	nte.	DER representative of	Mano)		
ATABIE VIN	ENTE BERNA			•			

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Filing Fee: \$25.00