L23000245325

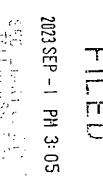
(Req	uestor's Name))
(Add	ress)	
(Adda	ress)	
(Čity/	/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL MAIL
(Busi	ness Entity Na	me)
(Doci	ument Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	, k see
		,\
	1	tt.31

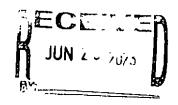
Office Use Only



400410163754

09/15/23--01010--003 **25.00





COVER LETTER

Tallahassee, FL 32314

TO: Registration So Division of Cor			
	Home Decor LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
Please return all correspo	ondence concerning this matter	to the following:	
	Elizabeth Espinosa		
		Name of Person	
	Fifth Financial LLC		
		Firm/Company	·
	990 Biscayne Blvd. 0-9021	В	
		Address	
	Miami, Florida 33132		
		City/State and Zip Code	
	eespinosa9225@aol.com	to be used for future annual report no	tification)
For further information of	concerning this matter, please c		meanony
Elizabeth Espinosa		305 994-4655 at ()	
Name (of Person		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 (additional copy is enclosed)	S60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		Street Address: Registration Se	ection
Registration Division of C		Division of Co	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TUA CASSA HOME DECOR 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 5/18/23 and assigned Florida document number L23000245325 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

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
AMBR	Georgette Duzoglou	17052 AQUAVERA WAY	□Add
		BOCA RATON, FLORIDA 33496	■Remove
			□ Change
AMBR	Georgette Coronado De Duzoglou	17052 AQUAVERA WAY	———— ≣Add
		BOCA RATON, FLORIDA 33496	□Remove
			□Change
			□Remove
			□ Change
			□Add
			□Remove
		□Change	
			□ Add
			Remove
			□Change
			DAdd
			Remove
			□Change

		_		
	-			
			<u>.</u>	
				
				
				
			<u> </u>	
	-			
		.=	<u>-</u>	
	·			
			· • • • • • • • • • • • • • • • • • • •	
Effective date, if other than the	ne date of filing:		(optional)	
If an effective date is listed, the date to Note: If the date inserted in this	ust be specific and cannot block does not meet the	be prior to date of filing or a applicable statutory fili	nore than 90 days after filing. ng requirements, this date	.) Pursuant to 605.020 will not be listed as
document's effective date on the	Department of State's re	ecords.		
e record specifies a delayed effect ord is filed.	ive date, but not an effe	ctive time, at 12:01 a.m.	on the earlier of: (b) Th	e 90th day after the
June 5 Dated	2023			
	,	<u> </u>		
^	, /			
Elga	leth Eap Signature of a member	asi		

Filing Fee: \$25.00