## L2400000841

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900432033649

96/24/34--01019--015 \*\*25.00



## **COVER LETTER**

		LC.	
	Name of Lin	ited Liability Company	
The enclosed Articles (	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	JUAN C PEREZ		
		Name of Person	
	Name of Limited Liability Company  osed Articles of Amendment and fee(s) are submitted for filing.  turn all correspondence concerning this matter to the following:    JUAN C PEREZ		
		Firm/Company	
	731 SE 1ST STREET		
		Address	- Fig. 6
SUBJECT:    JC AND YALY FASHION CAPITAL, LLC.   Name of Limited Liability Company			. W
			_
			ification)
For further information		·	
	· ·		
	e of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status &
Registration Division of	n Section Corporations 327	Registration Se Division of Co The Centre of T	rporations
rananassee	)	Tallahaceae FI	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YC AND YALY FASHION AND CAPITAL, LLC.

(Name of the Limited Liability Comps (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.2400000841	were filed on 12/17/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name most be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	731 SE 1 STREET	
(Principal office address MUST BE A STREET ADDRESS)	HOMESTEAD, FL 33030	
Enter new mailing address, if applicable:	731 SE I STREET	SECT JI
(Mailing address MAY BE A POST OFFICE BOX)	HOMESTEAD, FL 33030	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the	e name of the new registered
Name of New Registered Agent:		
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 mest be distinguishable and contain the words "Limited Liability Company," the designation "L.  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, entagent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	Enter Florida street address	
	, Flori	da

## 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.

City

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	YALINA MESA	9223 SW 123 AVE CT	
		MIAMI, FL 33186	■Remove
			□Change
<del></del>			□Add
			Remove
			S 20 Change TALL JUNE Add
			El Remove J
######################################			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
		<del></del>	
			Change

				4/-9/		-
<del></del>						_
						_
						_
						-
						_
						_
						_
	-					_
						_
					2021 SE	
					DRIE!	
			<u> </u>	·-	20 2	T
					まな。	· · · ·
					A CANA	
	<del> </del>					_
		<del></del>			1-10	_
ective date, if other t	han the date of fil	06/17/2023 ling:		(optio	nal)	
n effective date is listed, the <b>te</b> : If the date inserted i	date must be specific	and cannot be prior t	o date of filing or mor	e than 90 days after	tiling.) Pursuant to 60	)5.020
rument's effective date of	on the Department of	of State's records.	ore statutory ming	requirements, uns	date will not be its	ica a
ecord specifies a delayed	l effective date, but i	not an effective tin	ne, at 12:01 a.m. or	the earlier of: (b)	The 90th day aft	er the
is filed.						
ted JUNE 17		2023				
ted	-0	<del>}</del>				
[\]	\ \ \ \ \					
$\mathbb{Q}_{\mathcal{M}}$		$\sim$				
_ M	Signature	f a member or author	rized representative of	f'a member		

Filing Fee: \$25.00