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## **COVER LETTER**

TO: Registration Sect Division of Corpo			
SUBJECT: NE	W VISION (	Close + UC d Liability Company	<u>-</u>
The enclosed Articles of A	mendment and fee(s) are submit	tted for filing.	
Please return all correspond	dence concerning this matter to (	the following	
	_JosmEL	Name of Person	OPEZ_
		Firm Company	<del></del>
		U 168th St	
	M	City State and Zip Code  De 2 O gmailight  be used for future annual report nontre	Oa
	TUSINE/ISLO E-mail address: (tol	pe 9 D 9 maili be used for future annual report notific	(Sem ation)
For further information cor	ncerning this matter, please call:		, dd.
Tosmelis	LoPer Lope	2 at (305) 927-	1410
Name of I	Person	Area Code Daytime 1	OG  ZEMFFR 27 FN 2: 08  1410 Telephone Number
,	•		
Z) \$25.00 Filing Fee	S30,00 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:		Street Address:	
<del>-</del>	Registration Section Registration Section Division of Corporations Division of Corporations		
Division of Corporations P.O. Box 6327		The Centre of Ta	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEW VISION CLOSET LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
(Name of the Lamited Lability Company as it now appears on our records.) (A Florida Limited Lability Company)	
the Articles of Organization for this Limited Liability Company were filed on $\frac{O/3O/2Y}{}$ and assigned corida document number $\frac{\angle 24000056419}{}$	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability company here:	
ne new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."	_
nter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)    1776 Sw 168th St   Wilding Pl 33177	<u> </u>
Principal office address MUST BE A STREET ADDRESS) MIGMI FC 33179	<u>–</u>
	_
nter new mailing address, if applicable:	_ `
Mailing address MAY BE A POST OFFICE BOX)	
	_
. If amending the registered agent and/or registered office address on our records, enter the name of the new regis	terec
gent and/or the new registered office address here:	
Name of New Registered Agent: IOSMelis LoPez Lopez	_
New Registered Office Address:	
Enter Florida street address	
, Florida	_
·	
ew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply wit rovisions 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 = MS $AMBR = At$	anager uthorized Member		
Title MGZ	Dancy Agrila Comp	Address 11750 Sw 16844 MIAMI F(3317)	Type of Action  Add  Remove
		11750 SW (68thst	
			Change  Add F C Be  Remove
			Charge 2
			□Change
			□Remove □Change
			□Add
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
I DEED PUT HY NAME
Fosmelis LoPez Copez in the
AUthorizEd Person Detail to be
Able to open account in the bank
For my Bussins thansk
and my Employer I dentification
NUMBA 13 99-1025587
100 211 17 11 108 33 0 2
<u> </u>
2: 
E. Effective date, if other than the date of filing: 03/0//2024 (optional)  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b). The 90th day after the record is filed.
Dated 02/23/24
Signature of a member or authorized representative of a member
InsmElis LoPEZ Lopez Typed or printed name of signee