L12000004106

(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:				
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COVER LETTER

TO: Registration Section Division of Corporations				
•	2000 //C			
SUBJECT: CONSUELLA LACHELL	BAILEY, ECC			
Name of Limited	d Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Off	Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
CONSVELLA BAILES				
CONSVELLA BAILEY Name of Person				
Firm/Company				
104 SHERWOOD DRIVE Address				
Address				
ROYAL PARM BEACH, FL 3. City/State and Zip Code	3411			
City/State and Zip Code	,			
Cbrealestateneus e gnail	. com			
E-mail address: (to be used for future annual report notification	n)			
For further information concerning this matter, please call:				
Consuella Bailey at (at (561 , 420-2127			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations Division of Corporations				
Clifton Building P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			



July 29, 2013

CONSUELLA BAILEY 104 SHERWOOD DRIVE ROYAL PALM BEACH, FL 33411

SUBJECT: CONSUELLA LACHELL BAILEY, LLC

Ref. Number: L12000054106

We have received your document for CONSUELLA LACHELL BAILEY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 213A00018261

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CONSUELLA LACHELL BAILEY 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 April 23, 2012 and assigned Florida document number <u>L</u>12000054106 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 end with 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) P.O. BOX 213534 Enter new mailing address, if applicable: **ROYAL PALM BEACH, FL 33421** (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 608, 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.

	r change(s) here: (Attach additional sheets, if necessary.) E EIN# 45-5121033
FEEASE INCLUDI	L LIN# 40-0121000
Dated AUGUST 8	2013
Cas	ean
	member or authorized representative of a member
CONSUELLA BAILEY	
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00



OGDEN UT 84201-0038

In reply refer to: 0441789191 July 15, 2013 LTR 147C 0 45-5121033 000000 00 00006204 BODC: SB

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CONSUELLA LACHELL BAILEY LLC CONSUELLA BAILEY SOLE MBR 104 SHERWOOD DR ROYAL PLM BCH FL 33411-8209

المعافدة والمستنبينية المراكب المراكبين والمستنبين والمستنبين والمراكب المستان المراكب المراكبين والمستنب والمستنب

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Employer Identification Number: 45-5121033

Dear Taxpayer:

Thank you for your inquiry dated July 02, 2013.

Your Employer Identification Number (EIN) is 45-5121033. Please keep this letter in your permanent records. Enter your name and EIN on all federal business tax returns and on related correspondence.

If you need forms, schedules, or publications, you can obtain them by visiting the IRS web site at www.irs.gov or by calling toll free at 1-800-TAX-FORM (1-800-829-3676).

Please call our toll-free telephone number at 1-800-829-0115 with any questions you may have.

You also can write to us at the address shown at the top of this letter's first page.

When you write to us, please attach this letter and, in the spaces below, give us your telephone number with the hours we can reach you in case we need more information. You also may want to keep a copy of this letter for your records.

Telephone	Number	()	Hours
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We apologize for any inconvenience we may have caused you, and thank you for your cooperation.