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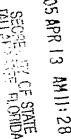
| | 1 | |
|-----------------------|--------------------------|--------|
| | (Requestor's Name) | |
| | (Address) | |
| - | (Address) | ··· |
| | (Udriess) | |
| | (City/State/Zip/Phone #) | |
| PICK-L | JP MAIT | MAIL |
| | (Business Entity Name) | |
| | | |
| · | (Document Number) | |
| Certified Copies | Certificates of | Status |
| Consist to the second | and a Filing Officer | |
| Special Instruction | ns to Filing Officer: | |
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| | Office Use Only | 1/18 |



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TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | | | | | | |
|---|--------------------------------|--|--|--|--|--|
| Striston of Corporations | | | | | | |
| SUBJECT: AROUND THE HOUSE TOO LLC | JECT: AROUND THE HOUSE TOO LLC | | | | | |
| (Name of Lim | ited Liability Company) | | | | | |
| | | | | | | |
| The enclosed Articles of Amendment and fee(s) are subn | nitted for filing | | | | | |
| | - | | | | | |
| Please return all correspondence concerning this matter t | o the following: | | | | | |
| ÷ | | | | | | |
| STEVEN R. CAPELLE | | | | | | |
| (Na | ime of Person) | | | | | |
| · | | | | | | |
| AROUND THE HOUSE TOO LLC | | | | | | |
| (F1 | rm/Company) | | | | | |
| | | | | | | |
| 715 EAST 2nd AVENUE APT #8 | | | | | | |
| | (Address) | | | | | |
| NEW SMYRNA BEACH, FLORIG | DA 32169 | | | | | |
| (City/S | tate and Zip Code) | | | | | |
| | | ₹. 0 | | | | |
| For further information concerning this matter, please ca | II: | SECREL ML NHA | | | | |
| STEVEN R. CAPELLE | st / 386 \ 314-961 | | | | | |
| (Name of Person) | at (Area Code & Daytime | Telephone Number | | | | |
| | | | | | | |
| Enclosed is a check for the following amount: | | CF STATE | | | | |
| □ \$25.00 Filing Fee □ \$30.00 Filing Fee & | Of ESS AD Dilling For & | <u> </u> | | | | |
| Certificate of Status | | ☐ \$60.00 Filing Fee, Certificate of Status & | | | | |
| | (additional copy is enclosed) | Certified Copy (additional copy is enclosed) | | | | |
| I · | • | | | | | |
| | | | | | | |

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

5 APR 13 AMII

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AROUND THE HOUSE TOO LLC

| | (A I | (Present Name) Florida Limited Liability Company) | | |
|-------------|--|---|---------------------|--------------------|
| | | | | |
| FIRST: | The Articles of Organization were document number <u>L0500002732</u> | e filed on MARCH 14, 2005 | and assigned | |
| SECOND: | The following amendment(s) liability company: | to the Articles of Organization | was/were adopted by | the limited |
| | Member's interest: Capelle transfers her interest to St | even R. Capelle | | |
| | : | | | Z 2 |
| | address: ng address for the Annual Report d Avenue APT #8, New Smyma E | | | CALLINE OF |
| | Illing of name of Registered Agent R. Capelle | t: | | F STATE FLOAIDA |
| | lling of name of member: R. Capelle | | | |
| Dated April | 11 | 2005 | | |
| | Signature of a m | ember or authorized representative o | a de a selle | ⊥ |
| | Steven R. Capelle | Rita A. Capelle | | <u> </u> |
| | Ţ. | Typed or printed name of signee | | |

Filing Fee: \$25.00

| Signed Date |
|---|
| NOTARY STATE OF FLORIDA, COUNTY OF VOLUSIA |
| Sworn and subscribed before me this |
| Steven R. Capelle Personally known OR produced identification Typ |
| of Identification. |
| NOTARY SIGNATURE Gois anne Lyson |
| My Commission Expires LOIS ANNE TYSON COMMISSION & DE LOGI |