

L06000005994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

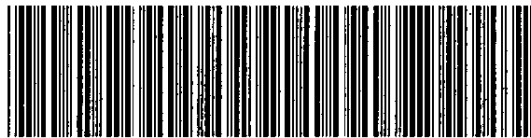
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S. HAWKES
OCT 16 2009
EXAMINER



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TALLAHASSEE, FLORIDA

S. HAWKES

OCT 17 2009

EXAMINER

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 7, 2009

LINDA PERRY
1462 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176

SUBJECT: UNFORGETTABLE CONSIGNMENT BOUTIQUE, LLC
Ref. Number: L06000005994

We have received your document for UNFORGETTABLE CONSIGNMENT BOUTIQUE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

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) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 709A00032421

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Unforgettable Consignment Boutique
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Linda L. Perry

Name of Person

Unforgettable Consignment Furniture and Decor

Firm/Company

1462 Ocean Shore Blvd

Address

Ormond Beach, Florida 32176

City/State and Zip Code

unforgettablecon@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda L. Perry

Name of Person

at (386)

441-5580

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 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:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Unforgettable Consignment Boutique

(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 January 2006

Florida document number L06000005994

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Unforgettable Consignment Furniture and Decor LLC

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:

same

(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:

Linda L. Perry

New Registered Office Address:

41462 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176

a street address

Florida

City

Zip Code

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.

Linda L. Perry
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

Title	Name	Address	Type of Action
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MGR

SQUIRE, RUTH A

679 WELLINGTON STATION BLVD., APT. 27
ORMOND BEACH, FL 32174

☐ Add
☒ Remove

MGR

Linda L. Perry

1462 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176

☒ Add
☐ Remove

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated October 2, 2009



Signature of a member or authorized representative of a member

Linda L. Perry

Typed or printed name of signee