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A. LUNT

EXAMINER

COVER LETTER

TO:	Registration Section
	Division of Corporations
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SUBJECT:	Duchess	Designs,	LLC
	(Nome of I	instead Linkility (Commonse)	

(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:

Evette Rousselle		
(Name of Person) Duchess Designs LLC (Firm/Company)		
(Firm/Company) 617 Timber Lane Eu		
(Address) Tarpon Springs, FL 346 FL (City/State and Zip Code)	2008 FEB	
For further information concerning this matter, please call:	σ	
Eve 4e. Rousselle at 813, 300-0392	P1 :1	
(Name of Person) (Area Code & Daytime Telephone Numbe	r)	

Enclosed is a check for the following amount:



\$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 . . .

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
Duchess Designs 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 $\frac{4/30/07}{1000}$ and assigned
The Articles of Organization for this Elithed Elability Company were filed on and assigned
Florida document number <u>L07000045</u> 342
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."
B. If amending the registered agent and/or registered office address on our records, enter the mame of the new
registered event and/on the new medition of a film of the second of the
Name of New Registered Agent: Laura Rehaluks 5
Name of New Registered Agent: Laura Rehalukit New Registered Office Address: 617 Timber Lane Image: Control office Address: Control office Address: Tarpon Springs Florida (City) Florida
(Enter Florida street address)
Tarpon Springs Florida 34689
(City), Florida (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

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.

(If Changing Registe	ura Re red Agent, Signatur	Laluk e of New Registered Agent)
Page 1 of 2		JARVES FRANCIS Notary Public, State of Floride Commissions 00756322 My comm. expines Nov. 19, 2011

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add
D. If am	ending any other information, enter	change(s) here: (Attach additional sh	eets, if necessary.)
	now to be	le, CEO Presiden listed at Vice	President.
2)		K, Vice President 03 CEO/ President	
Dated	2/8	08	
		member or authorized representative of a r A $R \in H A \perp U K$ Typed or printed name of signee	nember
		Page 2 of 2 Filing Fee: \$25.00	JARVES FRANCIS Notary Public, State of Florida
	,		Commission# DD735632 My comm. soptree Nov. 19, 2011
