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C. LEWIS

MAY 1 7 2010

EXAMINER

COVER LETTER

TO: Régistration Section Division of Corporations
SUBJECT: Posh Tampa, UC 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:
Tammy Eaton
Firm/Company
1015 E Ft. King St. Address
Cala, FL 3447) City/State and Zip Code
teaton 3 @ cfl. rr. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tarry Eaton at (352) 454-7214 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: \$25.00 Filing Fee \$\sum \\$55.00 Filing Fee & \sum \\$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed) 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

FILED

2010 MAY 14 AM 11: 18

Posh Tampa (Name of the Limited Liability Common	SECRETARY OF STATE SECRETARY OF STATE A SECRETARY OF STATE SECRETARY OF STATE A SECR		
(A Florida Limited Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number <u>LO700052423</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and end with the words "Limit	ted Liability Company." the designation "LLC" or the abbreviation		
"L.L.C."			
Enter new principal offices address, if applicable:	1015 E Ft. King St. Ocala FC 34471		
(Principal office address MUST BE A STREET ADDRESS)	Dcala, FC 39471		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1015 E Ft. King St. Ocala, Fl 34471		
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: Tam	my Eaton		
New Registered Office Address: 1015	Enter Florida street address		
<u>Ocal</u>	City , Florida 3447 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.

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 Type of Action **Address** Title Name ☐ Add Remove Tina Anastasia ☐ Add Remove Tamny Eaton ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) mmy Eastware of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00