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DIVISION OF CORPORATION

DIVISION OF CORPORATION

AND APR 22 PM 1: 51

J. BRYAN

APR 2 3 2008

EXAMINER

COVER LETTER

TO: Registration Section • Division of Corporations		
SUBJECT: 1st impressions apparel I.I.c.		
(Name of Lin	nited Liability Company)	
The enclosed Articles of Amendment and fee(s) are sur Please return all correspondence concerning this matter	_	
dewaren joseph		
	(Name of Person)	
1st impressions app		OS APR 22 PH I I
	(Firm/Company)	みが
1330 9th court ne		2 02
	(Address)	POR POR
winter haven,florida	33881	22 PH 1: 51
· · · · · · · · · · · · · · · · · · ·	(City/State and Zip Code)	*** ***
For further information concerning this matter, please	call:	
dewaren joseph	at (863) 327-5148	
(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount:		•
\$25.00 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	STREET/COURIEI Registration Section	R ADDRESS:

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

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

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



1st impressions apparel I.I.c.

(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 Liabil:	ity Company were filed on <u>02/25/20</u>	08 and assigned	
Florida document number <u>L08000020172</u>	·		
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the	e designation "LLC" or the abbreviation	
B. If amending the registered agent and/or r registered agent and/or the new registered office		cords, <u>enter the name of the new</u>	
Name of New Registered Agent:			
New Registered Office Address:	(Enter Florida street address)		
	, Florida		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regis	tered Agent:		
I hereby accept the appointment as registered ag the provisions of all statutes relative to the prope accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	er and complete performance of my o ed agent as provided for in Chapter stered office address, I hereby confit	duties, and I am familiar with and 608, F.S. Or, if this document is	
	(If Changing Registered Agent, Sign	nature 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 = Mana MGRM = Ma	ger naging Member		
Title	Name	Address	Type of Action
mgr `	Dewaren Joseph	1330 9th court ne winter haven,florida 33881	Add Remove
<u>mgrm</u>	Nancy Moschetti	1330 9th court ne winter haven,florida 33881	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	_
Dated	Dewaren Joseph	authorized representative of a member	DIVISION OF CORPORATIONS OR APR 22 PM 1-64

Page 2 of 2

Filing Fee: \$25.00