

LOS000044161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

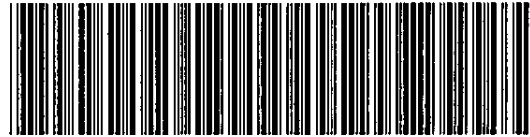
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B. KOHR
MAY 15 2012
EXAMINER



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05/10/12--01013--022 **25.00

12 MAY 10 PM 21 41

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OFFICE OF THE CLERK
OF THE SUPREME COURT
OF THE STATE OF NEW YORK

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Beach Brawl Sk8r Dolls, LLC
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:

Crystal A Esch

Name of Person

Beach Brawl Sk8r Dolls, LLC

Firm/Company

548 Mary Esther Cut-Off

Address

Fort Walton Beach, FL 32548

City/State and Zip Code

crystal@brownsvillewelding.com

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

For further information concerning this matter, please call:

Name of Person at (_____) _____
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

12 MAY 10 PM 2:41
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

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

Beach Brawl Sk8r Dolls, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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12 MAY 10 PM 2:41

The Articles of Organization for this Limited Liability Company were filed on 05/02/2008 and assigned
Florida document number L08000044161.

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."

Enter new principal offices address, if applicable:

(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:

New Registered Office Address:

Enter Florida 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.

If Changing Registered Agent, Signature of New Registered Agent

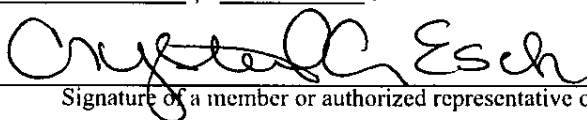
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PD	Kate McKenzie	701 W Blount St Pensacola, FL 32501	<input type="checkbox"/> Add <input type="checkbox"/> Remove
VPD	Brandi Bradley	710 Legion Dr J5 Destin, FL 32541	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
S	Jessica Phillips	2368 Shoal Creek Dr Pensacola, FL 32514	<input type="checkbox"/> Add <input type="checkbox"/> Remove
TD	Elisa Esterley	895 Santa Rosa Blvd # 614 Fort Walton Beach, FL 32548	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
TD	Crystal Esch	2860 Villa Woods Circle Gulf Breeze, FL 32563	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated May 7th, 2012



Signature of a member or authorized representative of a member

Crystal A Esch

Typed or printed name of signee