

L08000068790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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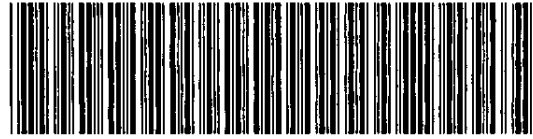
(Business Entity Name)

(Document Number)

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2013 SEP 23 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Ouligan SEP 24 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BE THE CHANGE KID WEAR, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LISA MASTO
Name of Person

BE THE CHANGE KID WEAR, LLC
Firm/Company

307 CAPTIVA DR.
Address

PONTE VEDRA, FL 32081
City/State and Zip Code

MASTO7@ATT.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LISA MASTO at (904) 755-8688
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee \$55 Filing Fee & Certified Copy

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2013 SEP 23 PM 12: 25

BE THE CHANGE KID WEAR, 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 JULY 16, 2008 and assigned Florida document number 108000068790

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)

307 CAPTIVA DRIVE
PONTE VEDRA, FL
32081

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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:

LISA MASTO

New Registered Office Address:

307 CAPTIVA DR

Enter Florida street address

PONTE VEDRA, Florida 32081
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.

Lisa Masto
If Changing Registered Agent, Signature of New Registered Agent

S

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
MGR	RAGDA McAfee	4745 PALM VALLEY RD. PONTE VEDRA BCH, FL. 32082	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	LISA MASTO	307 CAPTIVA DR. PONTE VEDRA, FL 32081	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	MATTHEW MASTO	307 CAPTIVA DR PONTE VEDRA, FL 32081	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

WE ARE AMENDING THE OWNERSHIP
OF THE COMPANY "BE THE CHANGE KID
WEAR" (RAGABOO) FROM RAGDA MCAfee
TO LISA MASTO

Dated 9/14/13

Lisa Mastro

Signature of a member or authorized representative of a member

LISA MASTO

Typed or printed name of signee

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