

LO8000069304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

LO8-69304

(Document Number)

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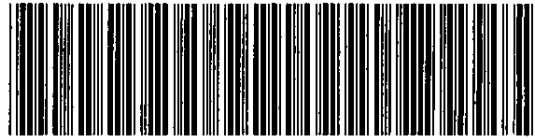
Special Instructions to Filing Officer:

A. LUNT

AUG 14 2008

EXAMINER

Office Use Only



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07/30/08--01024--004 **60.00

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2008 AUG 13 A 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 31, 2008

NOELENE D. DOBSON
5002 SKY BLUE DRIVE
LUTZ, FL 33558

SUBJECT: LUCKY BEADS AND ANGELIC GIFTS ONLINE, LLC
Ref. Number: L08000069304

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TALLAHASSEE, FLORIDA

We have received your document for LUCKY BEADS AND ANGELIC GIFTS ONLINE, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective July 1, 2007, the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 508A00044035

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Lucky Boutique Online.com
(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:

Noelene D. Dobson

(Name of Person)

Lucky Boutique Online.com

(Firm/Company)

5002 Sky Blue Drive

(Address)

Lutz, Florida 33558

(City/State and Zip Code)

For further information concerning this matter, please call:

Noelene D. Dobson

(Name of Person)

at (813) 532-3699

(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Lucky Beads and Angelic Gifts Online, 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 17 2008 and assigned
Florida document number G08199900086

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Lucky Boutique Online.com, LLC

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)

5002 Sky Blue Drive 3959 VAN DYKE Rd Suite
Lutz, Florida 33558 Suite 242
Lutz, FL 33558-8025

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:

Noelene D. Dobson

New Registered Office Address:

5002 Sky Blue Drive 3959 VAN DYKE ROAD Suite 242
(Enter Florida street address)

Lutz

(City)

Florida 33558 - 8025

(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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<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)*

Dated _____, _____

Noelene D. Dobson
Signature of a member or authorized representative of a member
NOELENE D. DOBSON
Typed or printed name of signee

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE