

L08000084864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

DEC 17 2013

A. LUNT

Office Use Only



800253931438

12/16/13--01025--011 **60.00

FILED
2013 DEC 16 PM 4:47
MILWAUKEE, WIS.

COVER LETTER

**TO: Registration Section
Division of Corporations**

Original Piece, LLC

SUBJECT: _____
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:

Tamara D. Oakley

Name of Person

Firm/Company

3948 3rd Street South, Suite 181

Address

Jacksonville Beach, FL 32250

City/State and Zip Code

originalpieceapparel@gmail.com

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

For further information concerning this matter, please call:

Lisa K. Pilgrim, MBA, CPA

904 694-4272

at ()

Name of Person

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



Barley | McNamara | Wild | Martin
CERTIFIED PUBLIC ACCOUNTANTS & ASSOCIATES

November 30, 2013

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

RE: Original Piece, LLC
Document: L08000084864

Dear Sir/Madam:

Attached are the Articles of Amendment to Organization of Original Piece LLC adding additional Members to the LLC effective December 1, 2013. A check made payable to the Florida Department of State is enclosed for \$60 to cover the filing fees.

If you have any questions or need additional information please contact Tamara Oakley-Doran or myself at the numbers indicated on the enclosed forms.

Thank you in advance for your assistance to this matter.

Regards,

Lisa K. (Campbell) Pilgrim, MBA, CPA

2013 DEC 16 PM 4: 37
FILING
SECTION

ORIGINAL PIECE, LLC

Page 1 of 3

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:

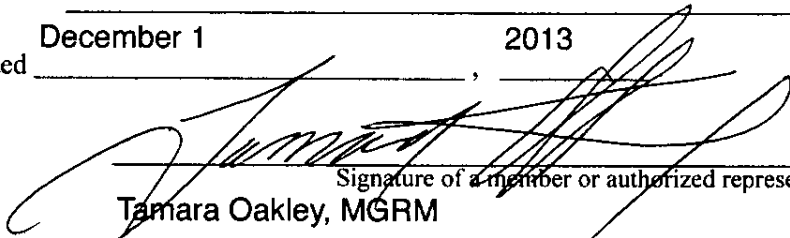
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	John Clifford Oakley	133 Yellow Bill Lane	<input checked="" type="checkbox"/> Add
		Ponte Vedra, FL 32082	<input type="checkbox"/> Remove
		32082	
MGRM	Nina-Nicole J Oakley-Dora	454 Royal Tern Rd S	<input checked="" type="checkbox"/> Add
		Jacksonville Beach, FL	<input type="checkbox"/> Remove
		32250	
MGRM	Carly-Rae O Oakley-Dora	454 Royal Tern Rd S	<input checked="" type="checkbox"/> Add
		Jacksonville Beach, FL	<input type="checkbox"/> Remove
		32250	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input 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 December 1, 2013



Signature of a member or authorized representative of a member

Tamara Oakley, MGRM

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2013 DEC 16 PM 4:57
CLERK OF COURT