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### **COVER LETTER**

TO:	Registration Sec Division of Cor						
•	Original I	Piece, LLC					
SUBJE	ССТ:	Name of Limit	ed Liability Company	<del>_</del> , , , ,	_		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	return all correspo	ndence concerning this matter	to the following:				
		Tamara D. Oakley					
			Name of Person	A PORT OF THE PARTY OF THE PART			
Firm/Company				<del></del>			
3948 3rd Street South, Suite 181							
	Address					5.1	
		Jacksonville Beach, Fl 32250			20 EU 82	Firstone	
City/State and Zip Code originalpieceapparel@gmail.com				<u> </u>	American		
		E-mail address: (to	o be used for future annual report notification	1)	- 1 303	2	
For fur	ther information c	oncerning this matter, please ca	all:		- 12	***	* 2
Lisa	K. Pilgrim, ME	BA, CPA	904 694-4272		* ***	! !	
	Name o	f Person	Area Code & Daytime Tele	phone Numl	ber	-	
Enclos	ed is a check for the	ne following amount:					
<b>□</b> \$25	5.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi	Filing Fedicate of Sied Copy ional copy	tatus &	

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

Kanpall (B

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### ORIGINAL PIECE, 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 Liabi	ility Company were filed on	and assigned
Florida document numberL08000084864	,	
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and end with th "L.L.C."	ne words "Limited Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	)X)	- Anna
		C.
B. If amending the registered agent and/or		ds, enter the name of the new
registered agent and/or the new registered office	e address here:	7
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florido	street address
_	1-1	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 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>	Address	Type of Action
MGRM	John Clifford Oakley	133 Yellow Bill Lane	Add
		Ponte Vedra, FL 32082	Remove
		32082	
MGRM	Nina-Nicole J Oakley-Dora ∩	454 Royal Tern Rd S	Add
		Jacksonville Beach, FL	Remove
		32250	
MGRM	Carly-Rae O Oakley-Dorar	454 Royal Tern Rd S	Add.
		Jacksonville Beach, FL	Remove
		32250	
		• 71)	Add
			Remove
			Add
			Remove
			Add
			Remove
			Kellove

	ation, enter change(s) here: (Attach additional shee	us, y necessury.)
•		
ecember 1	2013	
/ <u>-</u> }   <i>umu</i>	gnature of a member or authorized representative of a me	mhor
Tamara Oakley, M	IGRM	Hioci
<u>/</u>	Typed or printed name of signee	· · · · · · · · · · · · · · · · · · ·
	Page 3 of 3	· 🔀
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