

LO9 000073157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

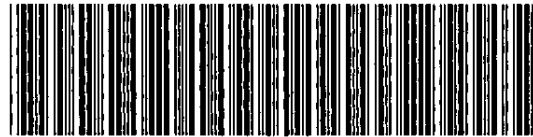
(Business Entity Name)

(Document Number)

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T. CLINE

JUL - 2 2012

EXAMINER

2012 JUN 28 AM 10:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 28, 2012

CRYSTAL LAFOSSE  
12021 TUSCANY BAY DR. #104  
TAMPA, FL 33626

SUBJECT: CALA CONNECTIONS, LLC  
Ref. Number: L09000073157

We have received your document for CALA CONNECTIONS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note 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".

The document number of the name conflict is L10000107782.

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) 245-6051.

Tammi Cline

2012 JUN 28 AM 10:13

FILED

Regulatory Specialist II

Letter Number: 312A00017707

FILED

2012 JUN 28 AM 10:13

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 19, 2012

CRYSTAL LAFOSSE  
12021 TUSCANY BAY DR. #104  
TAMPA, FL 33626

SUBJECT: CALA CONNECTIONS, LLC  
Ref. Number: L09000073157

We have received your document for CALA CONNECTIONS, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline  
Regulatory Specialist II

Letter Number: 412A00016996

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

2012 JUN 28 AM 10:13

FILED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cala Connections 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 LaFosse  
Name of Person

Firm/Company

12021 Tuscan Bay DR. #104  
Address

Tampa, FL 33626  
City/State and Zip Code

crystallafosse@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Crystal LaFosse at (337) 802-5525  
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

FILED  
JUN 28 AM 10:13  
TALLAHASSEE, FL  
DIVISION OF STATE  
CORPORATIONS

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Cala Connections

(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 7/29/09 and assigned  
Florida document number 109000073157.

This amendment is submitted to amend the following:

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

Concierge Connections of Tampa, 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)

12021 Tuscan Bay DR. #104  
Tampa, FL 33626

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12021 Tuscan Bay DR. #104  
Tampa, FL 33626

**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

**When 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
			<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.)**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2012 JUN 28  
 RE ID: 13  
 FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Dated June 15, 2012

*Crystal LaFosse*

Signature of a member or authorized representative of a member

Crystal LaFosse

Typed or printed name of signee