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T. CLINE

EXAMINER (1)

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Closets Nark 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:
Katrina Priore Name of Person
Minute Muse LLC Firm/Company
1733 Lakemont Ave #209
City/State and Zip Code Katrina Priore annual report notification) E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
For further information concerning this matter, please call: Various Prove
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{Solution} \text{Solution} \text{Fee} \text{\$\text{Certificate of Status}} \text{\$\text{Certified Copy} \text{\$\text{Certified Copy} \text{\$\text{Certified Copy} \text{\$\text{Certified Copy} \text{\$\text{(additional copy is enclosed)}}} \text{\$\text{Certified Copy} \text{\$\text{(additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy} \text{\$\text{(additional copy is enclosed)}}} \text{\$\text{\$\text{Certified Copy} \text{\$\text{(additional copy is enclosed)}}} \text{\$\text{\$\text{Certified Copy} \text{\$\text{(additional copy is enclosed)}}} \text{\$\text{\$\text{\$\text{Certified Copy} \text{\$\text{(additional copy is enclosed)}}} \text{\$\text{\$\text{\$\text{\$\text{Certified Copy} \$\text{\$\

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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(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 Florida document number 27-3195809.	were filed on $08/66/2010$ and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabile Minute Muse LLC The new name must be distinguishable and end with the words "Limit" L.L.C."				
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1733 Lakemont Ave#200 Orlando FL 32814			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1733 Lakemont Ave #209 Orlando FL 32814 5			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here				
Name of New Registered Agent: New Registered Office Address:	Enter Florida street address			

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.

City

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>	Name	Address	Type of Action
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D. If an	nending any other information, enter	change(s) here: (Attach additional sheets, if nece	mber = in
	Latrina Pr	nt marriage.	STATE ORIDA
Dated	June 10		
	1	nember or authorized representative of a member Latina Priore Dia Typed or printed name of signee	mord

Page 2 of 2

Filing Fee: \$25.00