

L10000104953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

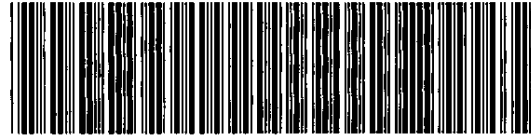
Special Instructions to Filing Officer:

A. LUNT

OCT 25 2010

EXAMINER

Office Use Only



000186851720

000186851720
10/22/10--01016--001 **25.00

2010 OCT 22 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

October 21, 2010

Florida Department of State

Div of Corporations

Re: Articles of amendment for Florida LLC, "A Statement of Fashion", Florida
document number L10000104953

Please find enclosed amendment form to add manager to Stanley Packman and delete
Joseph Steinberg as manager.

In addition, please add the FEI/EIN number as listed in the amendment.

A check for the \$25.00 filing fee is enclosed

Thanking you in advance.

Gail Steinberg
4289 NW 63rd Place
Boca Raton, FL. 33496
561-999-0000
561-212-9462

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: A Statement of Fashion
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:

Gail Steinberg

Name of Person

A Statement of Fashion

Firm/Company

4289 NW 63rd Place

Address

Boca Raton, FL. 33496

City/State and Zip Code

astatementoffashion@hotmail.com

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 OCT 22 AM 11:07

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For further information concerning this matter, please call:

Gail Steinberg

Name of Person

at (561)

999-0000

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

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

A Statement of Fashion

(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 10/07/2010 and assigned
Florida document number L10000104953.

This amendment is submitted to amend the following:

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

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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2010 OCT 22 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

Title	Name	Address	Type of Action
MGR	Joseph Steinberg	4289 NW 63rd Place Boca Raton, FL 33496	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Stanley S Packman	99 SE Mizner Blvd Ste 733 Boca Raton, FL	<input checked="" 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

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2010 OCT 22 AM 11:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Please add FEI/EIN 27-3626436

Dated _____

Gail Steinberg
Signature of a member or authorized representative of a member

Gail Steinberg
Typed or printed name of signee