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	Division of Corporations Fax Number : (850)617-6383	OF ST	AM 10:	
From:	Account Name : ROBERT W. HENDRICKSON, III, P.A.	RIDA	5	

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

: (941)795-0500

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J. SAULSBERRY EXAMINER

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	TREBOR STYLE, LLC			
(Name of the Limited (A	Liability Company as it now appear Florida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Li	ability Company were filed on		and assigned	
Florida document number L11000001	<u>957 </u>			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability company her	2 :		
The new name must be distinguishable and end with "L.L.C."	n the words "Limited Liability Compi	any," the designation "L	المنا	
Enter new principal offices address, if applica	ıble:		2011 SE	
(Principal office address MUST BE A STREE	TADDRESS)		<u> </u>	
			ASS 6	
Enter new mailing address, if applicable:			YOF AM	
(Mailing address MAY BE A POST OFFICE BOX)			STA C:	
			751	
B. If amending the registered agent and/or registered agent and/or the new registered of		our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:				
New Registered Office Address:	7051 Manatee Avenue We			
	Enter Florida street address			
	<u>Bradenton</u>	, Florida	34209	
	Clty		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

Page 1 of 2

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				
MGRM	Marilee S. Roberts	7093 S. Tamiami Trail Sarasota, El. 34231	☑ Add ☐ Remove				
			Add Remove				
			Add Remove				
			Add Remove -				
			Add Remove				
			Add Remove				
D. If amending	g any other information, enter change(s	here: (Attach additional sheets, if necessary.)	FIL 2011 APR -6 SECRETAR)				
			ARY OF STATE				
Dated	April 6 2011	_	-				
	Signature of a member of authorized representative of a member						
Robert W. Hendrickson, III Typed or printed name of algace							
	• • • • • •	·					

Page 2 of 2

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