L11000016350

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J. SAULSBERRY EXAMINER OCT 23 2012

COVER LETTER

TO:

TO: Registration Division of C	Section órporations		
SUBJECT:	All Brid	des 2 Be, LLC	
50142C1.		ited Liability Company	
	of Amendment and fee(s) are sul	•	
		Jessica Rios Name of Person	·
		All Brides 2 Be, LLC	\frac{1}{2} (c) \frac{1}{2}
		Firm/Company	ZAZ BCT
	3401	Henderson Blvd Suite E	
		Address	
		Tampa FL 33609	
	*****	City/State and Zip Code	ORIG
	E-mail address; (brides2be@gmail.com to be used for future annual report notification	S
For further information	concerning this matter, please of	•	•
	Jessica Rios	at (_813_) 406	6-0403
Name	of Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited L	2 DG, LLC ny as it now appears on o liability Company)	ur records.)
The Articles of Organization for this Limited Liability Company Florida document numberL11000016350	were filed on02	2/08/2011 Fand assigned
This amendment is submitted to amend the following:		AAY OF CSSEE
A. If amending name, enter the new name of the limited liab	ility company here:	STATE CRITE
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," tl	ne designation "LLC" of the abbreviation
Enter new principal offices address, if applicable:	3401 Henderson E	Blvd Suite E
(Principal office address MUST BE A STREET ADDRESS)	Tampa FL 33609	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3401 Hender Tampa FL	son Blvd Suite E 33609
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ecords, <u>enter the name of the ne</u> v
Name of New Registered Agent:	····	
New Registered Office Address:	Enter Flo	orida 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

	Name	Address	Type of Action
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			necessary.)
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amend	ing any other information, enter chang	ge(s) nere: (Attach adaittonal sheets, if	TALLAH
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Page 2 of 2

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