111000018676

•	(Requestor's Name)				
	(Address)				
	(Address)				
· · ·	(City/State/Zip/Phone	#)			
PICK-UF	P WAIT	MAIL			
	(Business Entity Name	e)			
(Document Number)					
Certified Copies	Certificates o	of Status			

Special Instructions to Filing Officer:

A. LUNT

DEC -7 2011

EXAMINER

Office Use Only



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COVER LETTER

TO:	`Registration S Division of Co				
SUBJECT: Bubble			gum Feet, LLC		
5000			ited Liability Company		
The en	nclosed Articles of	Amendment and fee(s) are su	bmitted for filing.		
Please	return all corresp	ondence concerning this matte	Tamara Taylor		
			Tamara Taylor Name of Person		
			Name of Person		
•			Firm/Company		
12620-3		12	620-3 Beach Blvd #232		
			Address		
	Jacksonville, FL 32246				
			City/State and Zip Code		
		lanas	dressingroom@gmail.com		
For fur	ther information	E-mail address: (concerning this matter, please of	to be used for future annual report notification)		
	Ta	mara Taylor	at (_888_)581-7653 extension 105		
	Name o	of Person	Area Code & Daytime Telephone Number		
Enclos	ed is a check for t	he following amount:			
□ \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 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		ration Section on of Corporations ox 6327	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

	Bubblegum Feet, LLC		
. (Name of t	ne Limited Liability Company as it now appea (A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this	Limited Liability Company were filed on	02/14/2011	and assigned
Florida document numberL1	1000018676		
This amendment is submitted to ame	nd the following:		
A. If amending name, enter the ne	w name of the limited liability company he	e <u>re</u> :	
	Lana Taylor, LLC		
The new name must be distinguishable a "L.L.C."	and end with the words "Limited Liability Comp	pany," the designation "l	LLC" or the abbreviation
Enter new principal offices address	, if applicable:		<u> </u>
(Principal office address MUST BE	A STREET ADDRESS)		
			<u> </u>
•			SES 6
Enter new mailing address, if appli	cable:		19 E I
(Mailing address MAY BE A POST	OFFICE BOX)		
B. If amending the registered agregistered agent and/or the new reg	gent and/or registered office address on istered office address here:	our records, <u>enter t</u>	the name of the new
Name of New Registered As	gent:		
New Registered Office Add		nter Florida street add	ross
	Ei		7 633
	City	, Florida	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

١

MGRM = Managing Member <u>Title</u> **Type of Action** <u>Name</u> **Address** ☐ Add Remove ∏ Add Remove _ Add _ Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 1 2011 Dated_ Signature of a member or authorized representative of a member Tamara Taylor Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00