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(City/	/State/Zip/Phone	e #)
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Certified Copies	Certificates	of Status
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SECRETARY OF SOUTH

B. BOSTICK

JUL - 2 2013

EXAMINER



VIA REGULAR U.S MAIL

June 27, 2013

Division of Corporations Attn: Registration Section PO Box 6327 Tallahassee, FL 32314

RE: Articles of Amendment to Articles of Organization for CARTER'S GALLERY, LLC

Dear Registration:

Enclosed please find our client's Cover Letter, Articles of Amendment and the accompanying filing fee.

Thank you for your anticipated cooperation.

Sincerely

Anthony W. Surber, Esquire

cc: Michelle Carter

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COVER LETTER

Division of Cor				
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.		
Please return all correspo	indence concerning this matte	r to the following:		
		Surber ES		
	(m) 04	Firm'Company	heny Surb	er, PA
	4809 Ehr	1:ch Rd # 1	02	
	Tampa,	FL 37624 City/State and Zip Code		
	E-mail address:	to be used for future annual report notification	ren Per Section)	
For further information of	oncerning this matter, please	call:	HAS:	1
Anthon	y Sorber	at (813 908 - Area Code & Daytim	6800 E	- 1
Name o	f Person	Area Code & Daytim	SECRE JARY OF LORID	2013 JUL -1 PH 5: 49
Enclosed is a check for th	e following amount:		-	
\$25.00 Filing Fee	□\$30.00 Filing Fee &	□\$55.00 Filing Fee &	□\$60.00 Filing Fee,	

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Carter's Gallery LLC

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company	were filed on Ppril 28, 2011 and assigned
Florida document number <u>L11000050249</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limi" "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	2013 SEC
	N
Enter new mailing address, if applicable:	75 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	Nce address on our records, enter the hame of the new
Name of New Registered Agent:	
New Registered Office Address:	
-	Enter Florida street address
	Y9 and A

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
MGR	Amanda J. Johnson	8418 Lagerfeld Dr Lard O'Lakes FL.	Add Add
			Add
			Add
		A CLA	Remove ZH JUL - Add
		ASSEL FLOR	P S Remove
			Add
			Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	· · · · · · · · · · · · · · · · · · ·
Dated	6-26-13
	Signature of a member or authorized representative of a member Color Michelle Color Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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