Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6389

From:

Account Name : LEGALING CORPORATE SERVICES INC.

Account Number : 120180000011 : (844)386-0178 Phone : (214)317-4754 Fax Number

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

Email Address:\_

## LLC AMND/RESTATE/CORRECTION M/MG RESIGN LADY AND ME STABLE LLC

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Electronic Filing Menu Corporate Filing Menu

Help

To: 18506176383 From: 12143052508 Date: 05/22/18 Time: 9:38 AM Page: 02/04 (((H180001575523)))

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street address
. Floride
Zip Code

New Registered Agent's Signature, it 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 605, 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

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To: 18506176383 From: 12143052508 Date: 05/32/18 Time: 9:38 AM Page: 03/04

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05/14/2018 15:10
It amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u> Name</u>		Address	Type of Action		
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		DORAL, FL 33178, 11	□ Change		
MGR	aura marina madrid	11402 NW 418T STRBET	Adć		
		SUITE 211 # 572	□ Remove		
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	Signature of a member of	authorized representative of	a member		
JUDEX GARCIA	Signature of a mainbar of	authorized representative of	a piember		

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