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12 MAY 15 PH 3: 44
SECRETARY OF STATE
ALL ARASSEE, FLORIDA

K.SALY EXAMINER MAY 16 2012

COVER LETTER

Division of Corporations
SUBJECT: LDC/Color Carectinos L.C. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Locked Love Creetings UC
Locked Love Creetings LLC
130 NE 48th Ave
Ocala Fl 34470 City/State and Zip Code
Hi-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Hacey Freeman at (350) 572-3957 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$Certified Copy \\ \text{(additional copy is enclosed)}\$\$ \$10.00 Filing Fee. \$\text{Certified Copy} \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$

MAILING ADDRESS:

5

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

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

12 MAY 15 PM 3: 44
SLONE JARY DESTATE
TALLAHASSEE, 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.

Citv

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager MGRM = Managing Member **Type of Action** <u>Address</u> **Title** Name Matthew Gray MGRM Remove ☐ Add Remove ☐ Add Remove Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2012 Typed or printed name of signce reeman

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:

Page 2 of 2

Filing Fee: \$25.00