

L12000034477

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

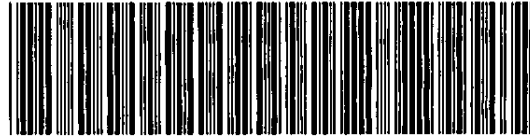
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2013 APR 24 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2013

GARY DOLAN
10525 #105 PARK BLVD.
SEMINOLE, FL 33772

SUBJECT: CAPELLIVBP-SQS BARBERSHOP LLC
Ref. Number: L12000034477

We have received your document for CAPELLIVBP-SQS BARBERSHOP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 513A00008332

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAPELLI VBP-SQS BARBERSHOP L.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:

GARY DOLAN

Name of Person

CAPELLI VBP-SQS BARBERSHOP L.L.C

Firm/Company

(NEW) 10525 #105 PARK BLVD. SEMINOLE

Address

SEMINOLE,

FL. 33772

City/State and Zip Code

GARYDOLAN7@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GARY DOLAN

Name of Person

at (727) 265-9710

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 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

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**

CAPELLIVBP-SQS BARBERSHOP L.L.C

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 3/12/2012 and assigned

Florida document number L12000034477
L12000034477

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This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

CAPELLIS BARBERSHOP L.L.C

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 10525 # 105 PARK BLVD

(Principal office address MUST BE A STREET ADDRESS)

SEMINOLE FL 33772

Enter new mailing address, if applicable: GARY DOLAN 7 @ Gmail .com

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: GARY DOLAN MGR

~~CAPELLIS BARBERSHOP L.L.C~~

New Registered Office Address: 10525 # 105 PARK BLVD SEMINOLE FL

Enter Florida street address

33772

Seminole

Florida

FL 33772

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.

GARY DOLAN
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> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---------------------------------|
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

NAME AND ADDRESS CHANGE

Dated

4/1/2013

Signature of a member or authorized representative of a member

GARY DOLAN

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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