

L120000039464

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bella Blu Boutique, LLC
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:

Susan Alexis Teasley
Name of Person

Bella Blu Boutique LLC
Firm/Company

534 N. Monroe St
Address

Tallahassee FL 32301
City/State and Zip Code

~~susan~~ susana.teasley@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan A Teasley at (229) 224 1238
Name of Person 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**

Bella Blu Boutique, LLC
(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 3-21-2012 and assigned
Florida document number L12000039464

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

Bella Blu Boutique LLC
534 N Monroe St
Tallahassee FL 32301

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Bella Blu Boutique LLC
534 N Monroe St
Tallahassee FL 32301

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:

New Registered Office Address:

Susan Alexis Teasley
534 N Monroe St
Tallahassee, Florida 32301
City Zip Code

Enter Florida street address

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.

Susan Alexis Teasley
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>
MGR	Virginia H Kanagy	1125 N Adams St	<input type="checkbox"/> Add
		Tallahassee FL 32303	<input checked="" type="checkbox"/> Remove
MGR	Annette Pitts	2801 Chancellorsville	<input type="checkbox"/> Add
		Drive Unit 921	<input checked="" type="checkbox"/> Remove
		Tallahassee FL 32312	
MGRM	Susan Alexis Teasley	534 N. Monroe St	<input checked="" type="checkbox"/> Add
		Tallahassee FL 32301	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated July 22, 1, 2013.



Signature of a member or authorized representative of a member

Susan Alexis Teasley

Typed or printed name of signee

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Filing Fee: \$25.00