Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H130000800903)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: FEARS NACHAWATI LAW FIRM

Account Number : 120130000023

Phone

(214)890-0711

Fax Number

(214)890-0712

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SHOE STUNNER, LLC

Certificate of Status 0	
Certified Copy	0
Page Count	01
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Corporate Filing Menu

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**B. KOHR** 



April 11, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SHOE STUNNER, LLC 9420 NW 49 PLACE SUNRISE, FL 33351

SUBJECT: SHOE STUNNER, LLC

REF: L12000118287

13 PRR 12 MIII: 08

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

The registered agent must sign accepting the designation.

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) 245-6051.

Gina McLeod Regulatory Specialist II FAX Aud. #: H13000080090 Letter Number: 513A00008565

RECEIVED

13 APR 12 AM 10: 49

SECRETARY GESTATE
ALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassec, Plonda 32314

412 - 2---

## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

Shoe Stunner, 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:

Andrea Perez

Name of Person

Fears | Nachawati Law Firm, PLLC

Pirm/Company

4925 Greenville Ave., Suite 715

Address

Dallas, TX 75206

City/State and Zip Code

aperez@fnlawfirm.com

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

For further information concerning this matter, please call:

Andrea Perez

214,890-071

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

S25.00 Filing Fee

☐\$30.00 Filing Fee & Certificate of Status

Certified Copy
(additional copy is enclosed)

☐\$60.00 Piling Pee,
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, PL 32301

FEDEX OFFICE 1676

H 1 3000080090 3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Shoe Stunner, LLO

(Name of the Limiter Company as it now annears on any records.

TO AND THE OWNER OF THE OWNER OWNER OF THE OWNER OW The Articles of Organization for this Limited Liability Company were filed on September 17, 2012 Florida document number L12000118287 This emendment is submitted to amond the following: A. If amending name, enter the new name of the limited liability company here: The new name most be distinguishable and and with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1000 South Federal Highway Enter new principal offices address, if applicable: Suite 1 (Principal office address MUST BE A STREET ADDRESS) Dania Beach, FL 93004 1000 South Federal Highway Enter new mailing address, if applicable: Suite 1 <u>(Malling address MAY BB A POST OFFICE BOX)</u> Dania Beach, FL 33004 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent audior the new registered office address here: Bryan Jahoda Name of New Registered Agent: 1000 South Federal Highway, Suite 1 New Registered Office Address: Enter Florida street address Dania Beach Florida 33004

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 fumiliar 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, Sixpature of New Resistered Acent

Page 1 of 3

Zip Code

MGR = Manager

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:

MGRM = M	lanaging Member		•
<u>Title</u>	Name	£.	Type of Action
MGRM	Bryan Jahoda	1000 South Federal Highway	/ ✓ Add
		Suite 1	Remove
		Dania Beach, FL 33004	_
			Add
	·		Remove
			_
			Add
			Remove
			Add
			Remove
			Add
		·.	Remove
,			Add
			Remove

If amending any other infe	ormation, enter change(s) here: (Attach additional sheets, if nec	essary.)
•	,	
		· <del></del>
April 9	2013	
	kovinjahoda	
	Signature of a member or authorized representative of a member	
Kevin Jahoo		
	Typed or printed name of signee	
	Page 3 of 3	•
	770 777	