

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

NOV - 6 2012

**EXAMINER** 



400241478744

11/05/12---01016---003 \*\*25.00

### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

Alanna Jewel, 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:

# Sarah Dyrda Crane

Name of Person

Moore, Hill & Westmoreland, P.A.

Firm/Company

220 West Garden Street, 9th Floor

Address

Pensacola, Florida 32502

City/State and Zip Code

scrane@mhw-law.com

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

For further information concerning this matter, please call:

## Sarah Dyrda Crane

,<sub>/</sub>850<sub>\</sub>434-354<sup>-</sup>

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

Alanna Jewel, L.L.C.		
( <u>Name of the Limited Li</u> (A Fl	ability Company as it now appears on our records.) orida Limited Liability Company)	
Γhe Articles of Organization for this Limited Liab	ility Company were filed on 10/29/2012	and assigned
Florida document number L12000137481	·	
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
The new name must be distinguishable and end with t 'L.L.C."	he words "Limited Liability Company," the designation	"LLC" or the abbreviatio
Enter new principal offices address, if applicab	le:	72 <b>73</b>
(Principal office address MUST BE A STREET A	ADDRESS)	HASSEY SEE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO		5 PH 4: 17 SEE. FLORIDA
registered agent and/or the new registered offic	registered office address on our records, <u>ente</u> e address here:	r the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	address
	, Florida	
	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.

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 **Title** Name 1 **Address Type of Action** Add Remove Remove

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E	Effective Date is 11/01/2012
_	
_	
Dated No	ovember 1 2012
	Wal Olyda Clave
	Signature of a member or authorized representative of a member
	Sarah Dyrda Crane
	Typed or printed name of signee

Page 3 of 2

Filing Fee: \$25.00