

L13000057449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 22 2013

J. BRYAN



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2013

PAOLA E ALONSO
THE VAPOR SHACK LLC
18901 SW 106TH AVE SUITE A-115
CUTLER BAY, FL 33157

SUBJECT: THE VAPOR SHACK LLC
Ref. Number: L13000057449

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TALLAHASSEE, FLORIDA

We have received your document for THE VAPOR SHACK LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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.

Joey Bryan
Regulatory Specialist II

Letter Number: 813A00018694

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THE VAPOR SHACK 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:

PAOLA E ALONSO

Name of Person

THE VAPOR SHACK LLC

Firm/Company

18901 SW 106TH AVENUE SUITE A-115

Address

MIAMI, FL 33157

City/State and Zip Code

RIJAI@MSN.COM

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

For further information concerning this matter, please call:

PAOLA E ALONSO

Name of Person

305 233-2551

at ()

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

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

THE VAPOR SHACK 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 04/19/2013

Florida document number L13000057449

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TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

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

N/A

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)

18901 SW 106 AVE SUITE A-115

CUTLER BAY, FL 33157

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

18901 SW 106 AVE SUITE A-115

CUTLER BAY, FL 33157

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: PAOLA E ALONSO

New Registered Office Address: 18901 SW 106 AVE SUITE A-115

Enter Florida street address

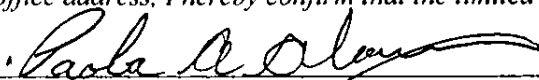
CUTLER BAY, Florida 33157

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 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>
MGRM	MAGGIE E WATSON	6100 SW 33 ST	<input type="checkbox"/> Add
		MIAMI, FL 33155	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

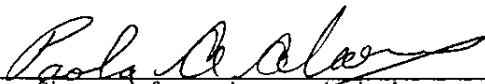
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TALLAHASSEE, FLORIDA

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☐ Add
☐ Remove
☐ Add
☐ Remove

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

N/A

Dated August 15, 2013



Signature of a member or authorized representative of a member

PAOLA E ALONSO

Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA