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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2013 NOV 25 PM 3:10  
TALLAHASSEE, FL 32309

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Ugly Girl Design, 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:

Julia Bardelang

Name of Person

Ugly Girl Design, LLC

Firm/Company

613 SW 2nd Dr

Address

Pompano Beach FL 33060

City/State and Zip Code

uglygirldesign@gmail.com

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

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TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

Julia Bardelang

954 235-7121

at ( )

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

**Ugly Girl Design, LLC**

(A Florida Limited Liability Company)

Page 1 of 3

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	Tony Farias	688 W Palm Aire Dr	<input type="checkbox"/> Add
		Pompano Beach FL 33069	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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

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Dated October 23, 2013

\_\_\_\_\_  
Signature of a member or authorized representative of a member  
Julia Bardelang  
\_\_\_\_\_  
Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

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