

L13000094632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

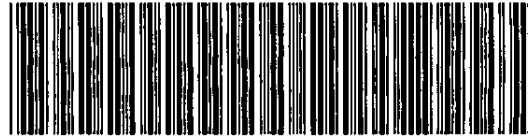
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Per Joseph Lawt only changing  
RA's name to Barbara Torres  
TH

Office Use Only



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07/18/13--01006--006 \*\*25.00

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 JUL 31 PM 3:30

AUG - 1 2013  
T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Stay Golden Swimwear & Fashions 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:

Barbara Torres  
Name of Person

Stay Golden Swimwear & Fashions LLC  
Firm/Company

17188 SW 144 Place  
Address

Miami, FL 33177  
City/State and Zip Code

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

For further information concerning this matter, please call:

Barbara Torres at ( 786 ) 543-0492  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
13 JUL 31 PM 2:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 19, 2013

BARBARA TORRES  
17188 SW 144 PLACE  
MIAMI, FL 33177

SUBJECT: STAY GOLDEN SWIMWEAR & FASHION L.L.C.  
Ref. Number: L13000094632

We have received your document for STAY GOLDEN SWIMWEAR & FASHION L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

List the name of the business.

What are you changing, nothing on the amendment was filed out.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of 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.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 913A00017600

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

Stay Golden Swimwear & Fashions 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 6/27/2013 and assigned  
Florida document number L13000094632.

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DIVISION OF CORPORATIONS  
13 JUL 31 PM 3:30

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)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**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:

Barbara E Torres

New Registered Office Address:

Enter Florida street 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.*

[Signature]  
If Changing Registered Agent, Signature of New Registered Agent

Is 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

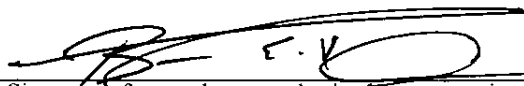
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Joseph F Lowit	17188 SW 144 place miami FL 33177	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	BARBARA VAIDES	17188 SW 144 place miami FL 33177	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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Remove

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

Just adding Joseph F Lowit as MGR  
and BARBARA VALDES AS MGRM THANK you  
very much.  
Barbara Valdes will be the name used.  
Jonathan Calvo will stay as MGRM.

Dated 7/29/13



Signature of a member or authorized representative of a member

Barbara Valdes

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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