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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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T. LAWARTON

# **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	Name of Limit	Store, LLC ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Lindo	Stephens Name of Person	
	Tren	dy Thrift Store	LLC
	2011 S.	N 101 ave Bay	A
	Miramar	FL 33025 City/State and Zip Code	
	Threndy +b E-mail address: (to	or fift Store Damail	COM.
For further information co	oncerning this matter, please ca	all:	
Linda S Name of	tephens Person	at (954) 381 - 984 Area Code & Daytime T	έ φ elephone Number
Enclosed is a check for th	e 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**

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The Articles of Organization for this Limited Liability Company were filed on \_ Florida document number L13000 107254

This amendment is submitted to amend the following:

A. If amending name, ent	er the new n	ame of the li	mited liability company here:	
Travial	Theigh	SERIC	1.0	

Trendly Thiff Stor	C, LLC			
The new name must be distinguishable and end with t "L.L.C."	he words "Limite	ed Liability Company,"	the designation "LLC" o	r the abbreviation
Enter new principal offices address, if applicab	le:	2011 SU	N 101 AVE	
(Principal office address MUST BE A STREET ADDRESS)		Bay A		
		Miramar	, FL 33025	
Enter new mailing address, if applicable:		541 N	1. Pine Islan	od Rd.
(Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>	Planta	tion, FL 33	3394_
B. If amending the registered agent and/or registered agent and/or the new registered offic			records, enter the na	me of the new
Name of New Registered Agent:	Linda	Stephens		······
New Registered Office Address:	541	N. Pipe Isi	land Rd.	. (Sump
		Enter F	lorida street address	
1	Planta	rion	, Florida 333	24
•		City		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>	Address	Type of Action
MGR	Tatosha Stephens	13551 SW 6th AUR #10	4 Add
		Pambroke RNesFL33028	Remove
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<del></del>		****	Add
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lf amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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d <u>10</u>	2/1/2015
	1 Williams
	Signature of a member or authorized representative of a member
	latosha Stephens
	Typed or printed name of signee

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Filing Fee: \$25.00

FILED
2013 NOV 13 MH 11: 05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA