

**L13000113643**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

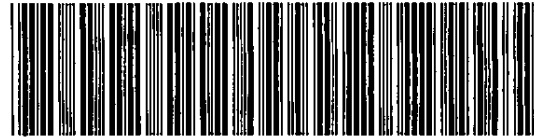
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



**300305321773**

11/06/17--01011--003 \*\*25.00

FILED  
17 NOV -6 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**S. WARREN**

**NOV 08 2017**

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SARAH& CO 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:

Ketty Labossiere

Name of Person

Marcum LLP

Firm/Company

525 Okeechobee Boulevard, Suite 750

Address

West Palm Beach, FL. 33401

City/State and Zip Code

ketty.labossiere@marcumllp.com

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

For further information concerning this matter, please call:

Ketty Labossiere

Name of Person

at ( 561 )

Area Code

653-7334

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

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

SARAH&CO 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 8/12/2013 and assigned  
Florida document number L13000113643.

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 contain 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:

MARCUM LLP, SHAUN BLOGG

New Registered Office Address:

525 OKEECHOBEE BLVD, SUITE 750

*Enter Florida street address*

WEST PALM BEACH

, Florida

33401

*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 605, 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

FILED  
NOV - 6  
10:59  
STATE  
OF FLORIDA  
TALLAHASSEE

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

☐ Remove  
17 NOV - 6  
Range  
1110:59  
☐ Remove

FILED

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

Remove Kevelson Lewis

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

*(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated Nov 1, 2017.

Signature of a member or authorized representative of a member

Shaun Blogg

Typed or printed name of signee

FILED  
17 NOV -6 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA