13000117486

(Requestor's Name)
(Address)
(Address)
(1881,555)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Littly Marrie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700258125567

03/31/14--01014--001 **25.00

SECRETARY OF STATEMS
BIVISION OF CORPORATIONS

J. HARRIS

COVER LETTER

TO: Registration So Division of Con			
SUBJECT: Local Co	olor Collection, LLC		
1		ited Liability Company	
•			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Claire Vande Polder		
		Name of Person	
	Local Color Collection	on, LLC	
·		Firm/Company	
	9201 Collins Avenue	· #426	
		Address	
	Surfside, FL 33154		
		City/State and Zip Code	······································
	cevp@hwmail.net	•	•
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
Claire Vande Polde	er	at (786) 768-2946	
Name o	of Person		Telephone Number
Enclosed is a check for the	 he 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)
	ING ADDRESS:	STREET/COURIE Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Local Color Collection, 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 20 August 2013 and assigned Florida document number L13000117486 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." 9201 Collins Avenue #426 Enter new principal offices address, if applicable: Surfside, FL 33154 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 9201 Collins Avenue #426 Surfside, FL 33154 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: New Registered Office Address: Enter Florida street address Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

H amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title Name Address Type of Action

Add

Remove

		Remove
		LI Aud
		Remove
		AAA V.S
		SION DE PARTON DE LA PROPERTIE
		- CGC
		SECRETARY OF SORATIONS DIVISION OF CORPORATIONS Add Add Add
		□ Remove
 	 	🗖 Add
		□ Remove

	omei mioi manon, en	g -(-)		
	 		· · · · · · · · · · · · · · · · · · ·	
	•			
<u> </u>				
			· · · · · · · · · · · · · · · · · · ·	
	•			
, ,	· .		•	
ne effective date mus	other than the date of the specific, cannot be prio this filed by the Florida Dep	or to date of receipt or fi	led date and cannot be	(optional) more than 90 days after
ated 26 March	$\mathcal{C}_{\mathcal{C}}$	2014		
1	Var	,	· · · · · · · · · · · · · · · · · · ·	
	Signature	e of a member or autho	rized representative o	f a member
Claire	Signature Vande Polder	e of a member or autho	rized representative o	f a member

Page 3 of 3

Filing Fee: \$25.00