# 13000119516

(Re	equestor's Name)	
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K. SALY EXAMINER OCT -9 2015

# **COVER LETTER**

**Registration Section Division of Corporations** 

SUBJECT: The	YOGA Shac	K		
-	Name of Limite	ed Liability Company	<del> </del>	
The enclosed Articles of Am	endment and fee(s) are subm	itted for filing.		
Please return all corresponde	nce concerning this matter to	the following:		
	Courtena	Y Hitzhor Name of Person	)	
	The Yoga	Sha che Firm/Company		
	<b>4</b> 395	4º Breck L Address	are	
		Address		
	Saras	iota Fr Su	1232	
_	Courtyhil	City/State and Zip Code  The gmail be used for future annual report	·com	
For further information conc	erning this matter, please cal	<b>l:</b>		
Courtenay to Name of Pe	titcher	at (770) 8 C	rime 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	☐ \$60.00 Filing Fee, Certificate of Status &	

## **MAILING ADDRESS:**

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

## STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

# TO ARTICLES OF ORGANIZATION OF

AMI	CLES OF OR	UMINIZATION		(~~
	OF			F/I Fr
		_		20150
7HE 9	OGA SHI	9CK LLC		2015 OCT -7 PM 2: 02
(Name of the Limit	d Liability Company A Florida Limited Liab	as it now appears on our oility Company)	records.)	SECRETAIN PM 2: 02
				LLAHASSEE STATE
The Articles of Organization for this Limited Li	ability Company we	ere filed on <u>0</u>	ber 4	and assigned ORIDs
Florida document number <u>*L13000/193</u>	<u>516</u> .			ALLAHASSEE, FISTATE and assigned ORIDA
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabilit	y company here:		
The new name must be distinguishable and contain the w	ords "Limited Liability	Company," the designatio	n "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applica	ahla			
• • •	_		·	
Principal office address MUST BE A STREE	<u>i address)</u> _			
	-			
Enter new mailing address, if applicable:	-			
<u>Mailing address MAY BE A POST OFFICE I</u>	<u>30X)</u> _	·		
	-			·
B. If amending the registered agent and/		e address on our r	ecords, <u>enter</u>	the name of the new
registered agent and/or the new registered of	<u>nce address nere</u> :			
Name of New Registered Agent:	Course No	my Hitchon	^	
Name of New Registered Agent.	423	11 1 2 2	<u> </u>	
New Registered Office Address:	465	N. Lemon		
	<u> </u>	Enter Florida street		211221
	<u>Jarasol</u>	Ta	, Florida	14776
		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

<u>Title</u>	Name	Address	Type of Action
MOR	Alli Koski	Ce417 Kahana Way Sarasota, FL 3423, Remove	□ Add
		Remove	Remove
			□ Change
			🗆 Add
			□ Remove
			Change
		ALL	Add PRemove
		HASSEL, TO	Remove Change Ch
			Remove
			Change
· · · · · · · · · · · · · · · · · · ·			🗆 Add
			Remove
			Change
<del></del>			Add
			□ Remove
			Change

or removed from our records:

Please remove Alli Koski	
From the LLC The Yoga Shack.	
Courtenay Hitchon is The sole owner.	
ZIS OF T	Γ <b>3</b> -
HASSEE P	
72: 02 02: 02 03: 02: 02: 03: 03: 03: 03: 03: 03: 03: 03: 03: 03	Name of the second
E. Effective date, if other than the date of filing:  (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 605.02  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	!07 (3)(b as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier (b) The 90th day after the record is filed.	of:
Dated 10 4 20 15,  Signature of a member or authorized representative of a member	
Courtenay Hitchon Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00