L13000144263

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
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(Do	cument Number)	<u>.</u>
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Palm Beach Athletic Wear, 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:

Kristen Lemoine

Name of Person

Palm Beach Athletic Wear & Yoga, LLC

Firm/Company

4767 PGA Boulevard

Address

Palm Beach Gardens, FL 33418

City/State and Zip Code

kristenlemoine@gmail.com

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

For further information concerning this matter, please call:

Kristen Lemoine

561 351-5833

Name of Person

Area Code

Daytime 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
(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

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
e Articles of Organization for this Limited Liability Company were filed on 10/14/2013 and as rida document number L13000144263				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	ility company here:			
Palm Beach Athletic Wear & Yoga, LLC				
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "LLC" or the abbrevi	_ atior		
Enter new principal offices address, if applicable:	4767 PGA Boulevard Palm Beach Gardens, FL 33418			
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:	4767 PGA Boulevard Palm Beach Gardens, FL 33418			
(Mailing address MAY BE A POST OFFICE BOX)		— III		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, enter the name of the	<u>hev</u>		
Name of New Registered Agent:		_		
New Registered Office Address:	Enter Florida street address	_		
	, Florida	_		
	City Zin Code			

New Registered Agent's Signature, if changing Registered Agent:

Palm Beach Athletic Wear, LLC

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

If 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:

<u>tle</u>	<u>Name</u>	Address	Type of Action
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D. If amending any other information, o	enter change(s) here: (Attach	additional sheets, if necessary.)
E. Effective date, if other than the date If an effective date is listed, the date must	of filing:	(optional) than 90 days after filing.) (605.0207 (3)(b
Dated 01/07/2014		
by's	re of a member or authorized repre	sentative of a member
Kns	Typed or printed name of	ine

Page 3 of 3

Filing Fee: \$25.00

