

L14000016015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

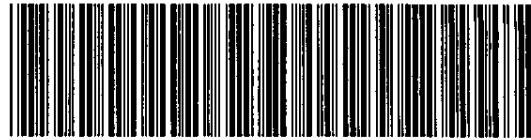
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

14 OCT 21 PM 2:25

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OCT 22 2014

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ju'Lyps The Icecream store LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L 14000016015
Amend

The enclosed ~~Resignation of Registered Agent~~ for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BERTHA KENNEDY
Name of Person

Ju'Lyps The ICE Cream Store
Name of Firm/Company

4729 22nd Ave So.
Address

St. PETERSBURG FL. 33711
City/State and Zip Code

bertha.kennedy 50 @ g-mail . Com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bertha Kennedy at (727) 804-8956
Name of Person Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

✦ **MAILING ADDRESS:**
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 26, 2014

BERTHA KENNEDY
4729 22ND AVE SOUTH
ST PETERSBURG, FL 33711

SUBJECT: JU'LYPS - THE ICE CREAM STORE LLC
Ref. Number: L14000016015

We have received your document for JU'LYPS - THE ICE CREAM STORE LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown
Regulatory Specialist II

Letter Number: 314A00020717

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Ju'lyps - The Icecream Store LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
14 OCT 21 PM 2:25
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01-29-14 and assigned
Florida document number L14 000016015.

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4729 22nd So.
St. Petersburg FL 33711

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Bertha Kennedy
P.O. Box 7534
St. Petersburg, FL 33734

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:

Bertha Kennedy

New Registered Office Address:

4729 22nd So. St. Petersburg FL 33711
Enter Florida street address

St. Petersburg, Florida 33711
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.

BKenny

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:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	BERTHA Kennedy	4729 22 Ave So. St. Pete Fl.	<input checked="" type="checkbox"/> Add
		DANA BROWN	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 10-9-14, _____



Signature of a member or authorized representative of a member

BERTHA KENNEDY

Typed or printed name of signee