

L14000047823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

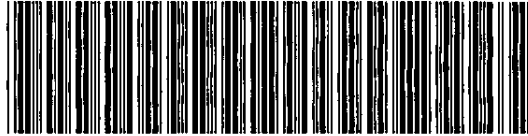
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 JAN 11 AM 10:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. Gulligan JAN 13 2016

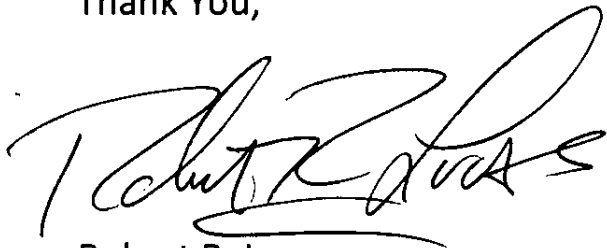
Hello,

Enclosed find the forms to do two things...

1. Change the Name of our FL Limited Liability Company
2. Change the address and Registered agent of same

I have included a \$25 fee for both changes... \$50 total.

Thank You,

A handwritten signature in black ink, appearing to read "Robert R. Lucas", with a stylized flourish at the end.

Robert R. Lucas
Managing Member

239-980-0881

332 Shadow Creek Drive
Brentwood, TN 37027

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KRISTINA LUCAS DESIGNS (Formerly Butterfly Beauty LLC)
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Lucas

Name of Person

KRISTINA LUCAS DESIGNS

Firm/Company

332 SHADOW CREEK DRIVE

Address

Brentwood, TN 37027

City/State and Zip Code

BOB@MOZYTRADING.COM

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

For further information concerning this matter, please call:

Robert Lucas

Name of Person

at (239) 980-0881

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

TO
ARTICLES OF ORGANIZATION
OF

BUTTERFLY BEAUTY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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16 JAN 11 AM 10:05

SECRETARY OF STATE
TALLAHASSEE FLORIDA

The Articles of Organization for this Limited Liability Company were filed on MARCH 24TH 2014 and assigned
Florida document number L14000047823.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

KRISTINA LUCAS DESIGNS LLC

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)

2631-A NW 41ST STREET
GAINESVILLE, FL 32606
(32606)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

332 SHADOW CREEK DRIVE
BRENTWOOD, TN 37027

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:

BILL KING, CPA

New Registered Office Address:

2631-A NW 41ST STREET

Enter Florida street address

GAINESVILLE

City

Florida

32606

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.

William D. King

If Changing Registered Agent, Signature of New Registered Agent

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	ROBERT R. LUCAS	332 SHADOW CREEK DRIVE	<input type="checkbox"/> Add
		BRENTWOOD, TN 37027	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	KRISTINA LUCAS	SAME AS	<input checked="" type="checkbox"/> Add
		ABOVE	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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E. Effective date, if other than the date of filing: JANUARY 4TH 2016 (optional)

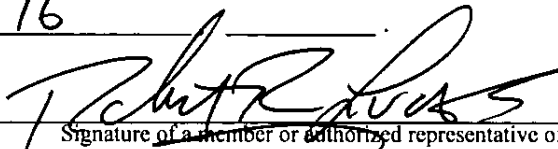
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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

1-4-16



Signature of a member or authorized representative of a member

Robert R. Lucas

Typed or printed name of signee