# L140000068484

(Re	questor's Name)	
(Add	dress)	
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PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE

# **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT:	Name of Limit	s of Cake LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Janes	se Anders	
		Pieces of Cake	LLC
		Cipriani #710	
	Clearwater	City/State and Zip Code  Coutlook.com to be used for future annual report notifi	<del>t</del>
	Janese A E-mail address: (1	to be used for future annual report notifi	cation)
For further information	concerning this matter, please ca		
Janese	Anders	at (727) 967- Area Code Daytime	2226 Telephone Number
Enclosed is a check for t	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 Fiting 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



RECEIVED

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# FLORIDA DEPARTMENT OF STATECRETARY OF STATE Division of Corporations TALLAHASSEE, FLORIDA

July 23, 2015

JANESE ANDERS 2725 VIA CIPRIANI # 7103 CLEARWATER, FL 33764

SUBJECT: JANESE'S PIECES OF CAKE, LLC

Ref. Number: L14000068484

We have received your document for JANESE'S PIECES OF CAKE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L15000099541 (PIECE OF HEAVEN, LLC).

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.

Tammy Hampton Regulatory Specialist III

Letter Number: 915A00015512

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Janese's Piece	es of Cake, LLL
( <u>Name of the Limited Liabili</u> (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number <u> </u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	
-	titled 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 ADDI	RESULT OF THE STATE OF THE STAT
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office add	istered office address on our records, <u>enter the name of the new</u> dress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
<del></del>	City Zip Code
New Registered Agent's Signature, if changing Registere	ed 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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Add
			□ Remove
			Change
		· -	□ Add
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			Change
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	if other than the date o				g.) Pursuant to 605.02
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Filing Fee: \$25.00