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June 16, 2014

Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, Fl 32314

To Whom It May Concern

This is my second request to amend the manager on record. I inadvertently put down Rachel Smith as manager meaning she is the manager of the store not the LLC. I have already sent in a request with a \$25 check. I am sending another in hopes it will be changed this time.

Thank you

Debora Dalton

Owner

Deb's Parties Plus, LLC

COVER LETTER

SUBJECT: DE	b's Parties Pi	lus LLC	
-	Name of Limi	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are subr	mitted for filing.	
Please return all correspond	lence concerning this matter t	to the following:	
	DeboRA	DALTON	
	Deb's Ra	Name of Person WHES Plus LL Firm/Company	
	11233 Ride	He OR	
	Spring Hill	Fl 31609 City/State and Zip Code	
	E-mail address: (t	Dho Huail. Com To be used for future annual report notificat	tion)
For further information con	cerning this matter, please ca	all:	
Deb Dutte Name of F	S/Person	at (352) 398-7 Area Code Daytime Te	1699 Elephone 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:

TO:

Registration Section
Division of Corporations

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

Neb's Partie	s Plus LLC.		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number 140000 77215.	were filed on 5/6/2014	and assign	ed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or th	e abbreviation "L.L.	C."
Enter new principal offices address, if applicable:	,		
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			· · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		er the name of	the new
Name of New Registered Agent:	······································		
New Registered Office Address:	Enter Florida street address		, (************************************
 	, Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		OP J	
I hereby accept the appointment as registered agent and agr	ee to act in this capacity. I further i	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:

MGR = Manager

AMBR = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Smith, Rachel	11233 Riddle Or	□ Add
•		11233 Riddle Or Spring Hill, 71 34609	Remove
		July 1111/ 11 Steel	Remove
. 16 1		0 1 //	
MAR	Debora Dalton	11233 Riddle DR	Add
		Spring Hill, 7/34609	□ Remove
		701	
			Add
			Remove
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	tive date, if other than the date of filing: [cetive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the this document is filed by the Florida Department of State) (optional)
Dated	6/15/14
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Page 3 of 3

Filing Fee: \$25.00