

L14000095496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

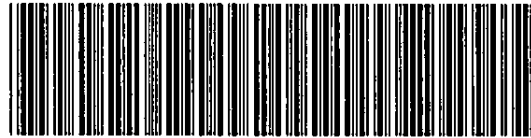
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

O SIMMONS

DEC 07 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 27, 2017

MARTA GIMENEZ  
1403 NEBRASKA AVE  
PALM HARBOR, FL 34683

SUBJECT: LUNA BY THE MOON, LLC  
Ref. Number: L14000095496

We have received your document for LUNA BY THE MOON, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$11.25.

The form you submitted is for a CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 217A00023844

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2017 DEC -5 PM 9:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Luna By The Moon 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:

Marta Falcon Gimenez

\_\_\_\_\_  
Name of Person

Luna By The Moon LLC

\_\_\_\_\_  
Firm/Company

1403 Nebraska Avenue

\_\_\_\_\_  
Address

Palm Harbor, Florida 34683

\_\_\_\_\_  
City/State and Zip Code

martafalconledservices@gmail.com

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

For further information concerning this matter, please call:

Marta Falcon Gimenez

727

742-4845

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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**

Luna By The Moon LLC

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

The Articles of Organization for this Limited Liability Company were filed on June 13, 2014 and assigned  
Florida document number L14000095496.

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 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)

1403 Nebraska Avenue

Palm Harbor, Florida 34683

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1403 Nebraska Avenue

Palm Harbor, Florida 34683

**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:

Marta Falcon Gimenez

New Registered Office Address:

1403 Nebraska Avenue

*Enter Florida street address*

Palm Harbor

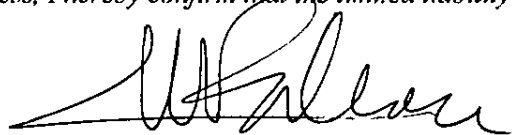
Florida 34683

*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.*



**If Changing Registered Agent, Signature of New Registered Agent**

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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	Stephanie Farren	462 Grant Street	<input type="checkbox"/> Add
		Dunedin, Florida 34698	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Stephanie Farren	462 Grant Street	<input type="checkbox"/> Add
		Dunedin, Florida 34698	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Marta Falcon Gimenez	1403 Nebraska Avenue	<input checked="" type="checkbox"/> Add
		Palm Harbor, Florida 34683	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Marta Falcon Gimenez	1403 Nebraska Avenue	<input checked="" type="checkbox"/> Add
		Palm Harbor, Florida 34683	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: November 17, 2017 (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 December 4,

2017

ber 4, 2017

Signature of a member or authorized representative of a member

Marta Falcon Gimenez

Typed or printed name of signee