

L14000193271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

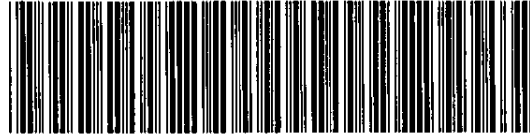
(Business Entity Name)

(Document Number)

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15 JUL 20 AM 7:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 21 2015

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Sade Lashawn 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:

Sharday Hunter
Name of Person

Firm/Company

P.O. Box 161431
Address

Fort Lauderdale, FL 33310
City/State and Zip Code

charliehunter27@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharday Hunter at (786) 202-3340
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 JUL 20 PM 4: 45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 19, 2015

SHARDAY L HUNTER ***** 2ND MAILING *****
P O BOX 101431
FT LAUDERDALE, FL 33310

SUBJECT: SADE LASHAWN, LLC
Ref. Number: L14000193271

We have received your document for SADE LASHAWN, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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: 015A00012134



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 JUN 18 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 10, 2015

SHARDAY L HUNTER
2024 NW 55 WAY
LAUDERHILL, FL 33313

SUBJECT: SADE LASHAWN, LLC
Ref. Number: L14000193271

We have received your document for SADE LASHAWN, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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

Tammy Hampton
Regulatory Specialist III

Letter Number: 015A00012134

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Sade Lashawn, LLC

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

FILED
15 JUL 20 AM 7:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12-19-2014

Florida document number L14600193271

This amendment is submitted to amend the following:

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

Septum Sisters 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)

185 South Palm Dr.
Baynton Beach, Florida, 33435

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 101431
Fort Lauderdale, FL 33310

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:

Sharday Hunter

New Registered Office Address:

185 South Palm Dr.

Enter Florida street address

Baynton Beach

City

, Florida

33435

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.

Sharday Hunter
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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA