

L150000013890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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15 APR -1 PM 1:34

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APR 01 2015

R. WHITE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 25, 2015

LAUREN CASTILLO
9425 NW 2ND PL
MIAMI SHORES, FL 33150

SUBJECT: FORTHELOVEOFSHOES, LLC
Ref. Number: L15000013890

We have received your document for FORTHELOVEOFSHOES, 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 effective date must be specific and cannot be prior to the date of filing.

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) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 015A00006000

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ForTheLoveofShoes
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:

Lauren Castillo

Name of Person

ForTheLoveofShoes, LLC

Firm/Company

9425 NW 2nd PL

Address

Miami Shores, FL 33150

City/State and Zip Code

ForTheLoveofShoess@gmail.com

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

For further information concerning this matter, please call:

Lauren Castillo

305
at ()

744-1074

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**

FILED

APR -1 PM 1:34

CLERK OF COURT
DADE COUNTY, FLORIDA

ForTheLoveofShoes

(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 1/23/15 and assigned
Florida document number L15000013890

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 end with 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)

9425 NW 2nd PL

Miami Shores, FL 33150

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9425 NW 2nd PL

Miami Shores, FL 33150

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:

Lauren Castillo

New Registered Office Address:

9425 NW 2nd PL

Enter Florida street address

Miami Shores

Florida

33150

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.

Lauren Castillo

If Changing Registered Agent, Signature of New Registered Agent

6/ 7

MGR = Manager
AMBR = Authorized Member

[illegible]

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

FEI/EIN 47-2891031

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated March 31, 2015

Lauren Castillo

Signature of a member or authorized representative of a member

Lauren Castillo

Typed or printed name of signee