L15 0000 63128

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COVER LETTER

1O: Regration Section
Division of Corporations

Trendy Fro	ogs Resale Baby/Kid Items, LL	С	
SOBJECT.	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Judith S. Lambert		
	Lambert Law Offices, PL	Name of Person	
	617 West Lumsden Road	Firm/Company	
	Brandon, Florida 33511	Address	
	judy@judithslambert.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information of	concerning this matter, please c	all:	
Judith S. Lambert		813 662-7429	
Name o	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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 enclose

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

Trendy Frogs Resale Baby/Kid Items, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 4/10/2015	and assigned
Florida document number L15000063128	_·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
Trendy Consignment, LLC		
The new name must be distinguishable and contain the words "Limi	ited 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 ADDR	ESS)	
		*
		1010
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		-0
B. If amending the registered agent and/or regist		
registered agent and/or the new registered office addr	<u>'ess here</u> :	, i
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member Title **Name** <u>Address</u> Type of Action _ 🗆 Add _ _ _ □ Remove □ Add ______ _ _ _ _ _ _ _ _ _ _ _ _ _ _ Remove _□ Change ☐ Remove ☐ Change □ Add _□ Remove _____ Change _□ Add □ Remove _____ _ _ _ _ Add ☐ Remove

_____ Change

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<u>:Note:</u>	ive date, if other than the date of filing:
the red) The	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	April 1 2019
	Signature of a incomber or authorized representative of a member
	Karen D. Simmons

Page 3 of 3

Filing Fee: \$25.00