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JAN 2 5 2016

COVER LETTER

TO: , Registration Section Division of Corporations
SUBJECT: Le Attitude, 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:
Kaye G. Borderick Name of Person
Le Attitude LLC Firm/Company
712 W. Main St. Suite 2
Leesburg FL 34748 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kaye G. Borderick at (352) 314-8899 Fin State Area Code Daytime Telephone Number Strip C
Name of Person Area Code Daytime Telephone Number ART 22 Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

<u>Le Attitu</u>	ige, LLC	
(Name of the Lim	ited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited I Florida document numberL1500012.	Liability Company were filed on July 22, 2015	and assigned
This amendment is submitted to amend the fol	llowing:	
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 appli	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered of	d/or registered office address on our records, <u>ente</u> office address here:	er the name of the new
Name of New Registered Agent:	Brooke L. Borderi	c.K
New Registered Office Address:		7A 於 201
	Enter Florida street address	T JAN
	, Florida,	Zip Code
New Registered Agent's Signature, if changing	,	
	red agent and agree to act in this capacity. I further a per and complete performance of my duties, and I an	

If Changing Registered Agent, Signature of New Registered Agent

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 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>	Name	Address	Type of Action
MGR	Brooke L. Borderick	8240 Via Bellast. Sanford, Fl. 32771	_ M Add
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ective date, if other than the date of filing:	(optional) ラース
n effective date is listed, the date must be specific and cannot be prior to date of filing oute: If the date inserted in this block does not meet the applicable statutory for cument's effective date on the Department of State's records.	or more than 90 days after filing.) Pursuant to 605.0
record specifies a delayed effective date, but not an effective he 90th day after the record is filed.	ve time, at 12:01 a.m. on the earlie
ted Jan 19 2016 Rosal R)
11000	
Signature of a member or authorized representa	ative of a member

Page 3 of 3

Filing Fee: \$25.00