L15000/83829

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K.SALY EXAMINER JAN 21

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
RUCHEL L TOUSSUINT	
The Bay Dolls Firm/Company	
5840 SOUTH Flamingo Ra #133	
COOPEY CHY, FL 33830 City/State and Zip Code	
TNUBORDONICO GMON COM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Rachel L. Toussaint at (954), 860-4155 Name of Person at (954) Daytime Telephone Number	_
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	Status &

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

TO **ARTICLES OF ORGANIZATION**

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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the meregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address Florida Zip Code	O)F	- ILFr.
The Articles of Organization for this Limited Liability Company were filed on 10/20/2015 and assigned Florida document number 15000/83829. 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the nergistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida Zip Code	The Bar Dolls, Lic		PO16 JAN 19 P.
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Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Zip Code		5840 SOUTH FIQUE	Mingo Rd:#133 3330
New Registered Office Address: Enter Florida street address Florida City Zip Code	B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, en	nter the name of the new
Enter Florida street address , Florida	Name of New Registered Agent:		
City , Florida	New Registered Office Address:		
City Zip Code		Enter Florida street address	
•			*
NOW MOREGONOU RECORTE NECESSARY OF Abanding Hacidaged A	New Registered Agent's Cignoture if changing Designand Agents	City	Zip Code

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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Rachel L. Toussaint	5840 South Flamings Re	Add
		#133 COOPER (171), FL	Remove
		<u>55350</u>	Change
			🖸 Add
		- sport.	Remove
			Change
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		(SSEL)	Remove
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E. Effective date, if other than the date of filing: 011310 (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 605.0 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	207 (3)(b) as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier (b) The 90th day after the record is filed.	of:
Dated 0113 10 Signature of a member or suthorized representative of a member	
Angela Gothice-Rodriguez Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00