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(Re	equestor's Name)	<del></del>
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PICK-UP	☐ WAIT	MAIL
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MAY 12 2016 J SHIVERS





April 21, 2016

LAURIE MEEHAN 4711 BRIAR PATCH LANE ST CLOUD, FL 34771

SUBJECT: A WOMAN'S TOUCH PAINTING & SIGNS LLC

Ref. Number: L16000003242

We have received your document for A WOMAN'S TOUCH PAINTING & SIGNS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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.

Letter Number: 816A00008268

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

www.sunbiz.org

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: A WOMAN'S TO	JCH PAINTING & SIGNS	S, LLC		
DOCUMENT NUMB	ER:				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	pondence concerning this mat	tter to the following:			
į	_aurie J. Meehan				
-		Name of Contact Persor	1		
1	A WOMAN'S TOUCH PAINTING & SIGNS, LLC				
<u>-</u>	111011171110				
	4711 Briar Patch Lane	Firm/ Company			
-		Address	<del></del>		
;	St. Cloud, FL 34771				
-	,	City/ State and Zip Code	•		
horse	adyrides@gmail.com	•			
	E-mail address: (to be us	sed for future annual report	notification)		
	concerning this matter, pleas		000 5536		
Laurie J. Meehan		at (	908-5526		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	ortment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divis P.O.	ing Address indiment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Woman's (Name of the Limited E)	ability Company as it now appears on our records.)  Torida Limited Liability Company
The Articles of Organization for this Limited Liabil Florida document number	
This amendment is submitted to amend the following	ng:
A. If amending name, enter the new name of the A Woman's Touch	
Enter new principal offices address, if applicable	*
(Principal office address MUST BE A STREET A	DDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, enter the name of the new address here:
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, 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
			Add
			Remove
			Change
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fective date, if other than the date of filing:	prior to date of f	iling or more than 9	0 days after filing.) Pur	suant to 605.
ote: If the date inserted in this block does not meet the apseument's effective date on the Department of State's recomment.		ory filing require	ments, this date will	not be liste
record specifies a delayed effective date, but The 90th day after the record is filed.	not an effe	ective time, at	: 12:01 a.m. on t	he earlie
ated 5/5/16 ,	•			
MI Julian				
Signature of a member or a	and a second			

Page 3 of 3

Filing Fee: \$25.00