

L16000005100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

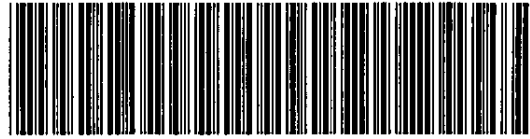
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 JUL - 8 A 8:56

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JUN 11 2016

D. BRUCE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MB USED CLOTHING 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:

JOSEPH, IMELDA OGE

Name of Person

Firm/Company

617 3RD STREET SUITE 6

Address

Boynton Beach, FL 33435

City/State and Zip Code

alexis72279@msn.com

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

For further information concerning this matter, please call:

JOSEPH, IMELDA OGE

at (561) 619-1742

Name of Person

Area Code

Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

MB USED CLOTHING LLC

(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 06/27/2016 and assigned
Florida document number L16000005100.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ISLAND RAGS LLC

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 applicable:

(Principal office address MUST BE A STREET ADDRESS)

617 3RD STREET SUITE 6

Boynton Beach, FL 33435

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3963 Hallmark Circle

Boynton Beach, FL 33436

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:

JOSEPH, IMELDA OGE

New Registered Office Address:

3963 Hallmark Circle Boynton Beach, FL 33436

Enter Florida street address

Boynton Beach

, Florida 33436

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MARIE Y ALEXIS - Remove	1520 NE 2ND COURT	<input type="checkbox"/> Add
		BOYNTON BEACH, FL 33436	<input checked="" type="checkbox"/> Remove
		3663 HALLMARK CIRCLE	<input type="checkbox"/> Change
ONWER	JOSEPH, IMELDA OGE - Add	BOYNTON BEACH, FL 33436	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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2016 JUN - 8 AM 8:56
TALLAHASSEE, FLORIDA
CLERK OF COURT

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

MY NAME IS MARIE Y ALEXIS I NO LONGER THE OWNER OF MB USED CLOTHING LLC

THE NEW OWNER IS JOSEPH, IMELDA OGE THE BUSINESS IS IN THE SAME LOCATION AT

617 3RD STREET SUITE 6 BOYNTON BEACH, FL 33435 AND ALSO THE NAME OF THE BUSINESS

WILL BE CHANGE FROM MB USED CLOTHING LLC TO ISLAND RAGS

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ **(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 605.0207 (3)(b)

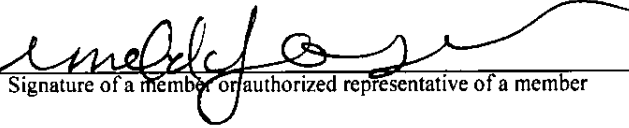
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

6/27/16


Signature of a member or authorized representative of a member

Imelda Josepa
Typed or printed name of signee