

L16000060538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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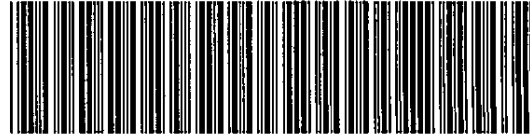
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER

JUL 18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fairytale Strollers 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:

Scott Daniels

Name of Person

Fairytale Strollers LLC

Firm/Company

881 W Dolphin Ridge Road

Address

West Palm Beach, FL 33406

City/State and Zip Code

sdaniels@fairytalestrollers.com

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

For further information concerning this matter, please call:

Scott Daniels

407 487-0177
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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**

Fairytale Strollers LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/25/2016 and assigned
Florida document number L16000060538.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

881 W Dolphin Ridge Road

West Palm Beach, FL 33406

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

881 W Dolphin Ridge Road

West Palm Beach, FL 33406

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:

KAREN HUBBARD

New Registered Office Address:

12103 LAKEWOOD COURT

Enter Florida street address

FORT MYERS
City

Florida

33908
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.

Karen Hubbard

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>
President	Ryan Hatch	9544 NW 48TH MNR	<input type="checkbox"/> Add
		CORAL SPRINGS, FL 33076	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP MGR	Scott Daniels	881 W DOLPHIN RIDGE RD	<input type="checkbox"/> Add
		WEST PALM BEACH, FL 33406	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
Reg Agen	Ryan Hatch	9544 NW 48TH MNR	<input type="checkbox"/> Add
		CORAL SPRINGS, FL 33076	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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

Please remove Ryan Hatch completely from Fairytale Strollers LLC and institute Scott Daniels

as President of Fairytale Strollers LLC with new Registered Agent as specified above.

MANAGER

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 8 July 2016 (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 8 July 2016

Signature of a member or authorized representative of a member

Ryan Hatch

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

Gale L. Drake

