116000186488

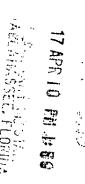
(Re	questor's Name)	
	•	
(Ad	dress)	
(Ad	dress)	
(, , ,	4,000)	
	·	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Pu	siness Entity Nan	ne)
(Du	Siness Enuty Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
		
Special Instructions to	Filing Officer:	İ
		· ·

Office Use Only



700297671787

04/10/17--01016--006 **25.00



APR 1 1 2017 Y SULKER

COVER LETTER

CHIR IE		aroe Sho	ppe LLC			
SOBJEC			Name of Lim	nited Liability Company	,	
The encl	osed Art	icles of A	mendment and fee(s) are sub	mitted for filing.		
Please re	eturn all c	correspor	dence concerning this matter	to the following:		
			Cheri Brich			
				Name of Person	l	
Lularoe Shoppe LLC Firm/Company 34107 Spring Oak Trail Address Wesley Chapel FL 33545 City/State and Zip Code lularoealyssaandcheri@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Cheri Brich 813 995-5637 at (
		Division of Corporations Lularoe Shoppe LLC T: Name of Limited Liability Company seed Articles of Amendment and fee(s) are submitted for filing. urn all correspondence concerning this matter to the following: Cheri Brich Name of Person Lularoe Shoppe LLC Firm/Company 34107 Spring Oak Trail Address Wesley Chapel FL 33545 City/State and Zip Code lularoealyssaandcheri@gmail.com E-mail address: (to be used for future annual report notification) or information concerning this matter, please call: ch 813 995-5637 at (
	Lularoe Shoppe LLC Name of Limited Liability Company					
				Address		
Division of Corporations Lularoe Shoppe LLC SUBJECT: 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: Cheri Brich Name of Person Lularoe Shoppe LLC Firm/Company 34107 Spring Oak Trail Address Wesley Chapel FL 33545 City/State and Zip Code lularoealyssaandcheri@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Cheri Brich Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S \$25.00 Filing Fee						
	Division of Corporations Lularoe Shoppe LLC Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. asse return all correspondence concerning this matter to the following: Cheri Brich Name of Person					
			E-mail address: (to be used for future an	nual report noti	fication)
For furth	er inforn	nation co	ncerning this matter, please ca	all:		
Cheri Bı	rich				995-5637	
		Name of	Person		Daytim	e Telephone Number
Enclosed	l is a che	ck for the	: following amount:			
\$25.0	00 Filing	; Fee		Certified Cop	y	Certificate of Status & Certified Copy
<i>;</i> ·		Registra Division P.O. Box	tion Section of Corporations 6 6327	Regi Divis Clifto - 2661	stration Section sion of Corpor on Building Executive Ce	n ations nter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lularoe Shoppe LLC

nny as it now appears on our records.) Liability Company)	, , , , , , , , , , , , , , , , , , ,	
were filed on October 6, 2016	and assig	ned
ility company here:		
lity Company," the designation "LLC" or the al	breviation "L.L.	C."
34107 Spring Oak Trail		
Wesley Chapel, FL 33545		
34107 Spring Oak Trail		
Wesley Chapel, FL 33545		
ffice address on our records, <u>enter</u> <u>e</u> :	20 2	the I
		Ö.
	<u> </u>	<u> </u>
		4
Enter Florida street address	021	1,-
, Florida	S 60	
	ility company here: lity Company," the designation "LLC" or the al 34107 Spring Oak Trail Wesley Chapel, FL 33545 34107 Spring Oak Trail Wesley Chapel, FL 33545 ffice address on our records, enteres:	were filed on October 6, 2016 and assignation

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR =	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			Change
			Add
		 	□ Remove
		**************************************	☐ Change
			Add
			☐ Remove
		· · · · · · · · · · · · · · · · · · ·	□ Change
		10 10 10 10 10 10 10 10 10 10 10 10 10 1	Add 6
			Remove
			Change Change Change Change
			Add
			□ Remove
		VO	Change
			Add
		***************************************	Remove
			☐ Change .

-		······································	
			
		· · · · · · · · · · · · · · · · · · ·	
		w.,	
- · · · · · · · · · · · · · · · · · · ·	 	ر حد د کام	, 7
			A.P.R
		ဟ _{ု :} (၇) : (၂) :	
		Prince Company	7
		LOS COST	die.
		C***,	€ 3
fective date, if other than th	e date of filing:	(optional)	
n effective date is listed, the date m te: If the date inserted in this	ust be specific and cannot be prior to date of clock does not meet the applicable sta	of filing or more than 90 days after filing.) Pursuant i tutory filing requirements, this date will not b	to 605,020 e listed a
cument's effective date on the	Department of State's records.		
record execifies a delay	ad officially data, but not an o	ffective time, at 12:01 a.m. on the ϵ	arlian a
The 90th day after the re	cord is filed.	nective time, at 12.01 a.m. on the e	antei C
April 5	2017		
ted			
01	mi Buch		
CR	eri Brech Signature of a member or authorized re	presentative of a member	

Page 3 of 3

Filing Fee: \$25.00