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SEURETARY OF STATE TALLAHASSEE, FLORIDA

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K. SALY JAN 12 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Show Flo "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:
Ashly Kay Brown Name of Person  Show Flo  Firm/Company  738 N OSage Or  Address  Tulsa OK 74104  City/State and Zip Code  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ashley Ray Brown at (918) 592-8387  Name of Person at (918) Daytime Telephone Number
Enclosed is a check for the following amount:  \$25.00 Filing Fee \$ Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status & Certified Copy (additional copy is enclosed)  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

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(Name of the Limited Liability Company)  (Name of the Limited Liability Company)  (A Florida Limited Liability Company)
(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 NOV 18,2610 and assigned Florida document number 100001100
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)
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 new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:  Enter Florida street address

## 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.

City

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 **Title** Name **Address Type of Action** shleykBrown 738 - 🗖 Add Remove \_□ Change Shawn Bradley □ Add Boca Raton Fl III Remove \_□ Change ₫ Add ☐ Remove ☐ Change FIRAdd 5 ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

Ashly Kay Proun, am removing my 15 year old son Shawn Bradley and Changing my title from CEO to Authorized member. I am having problems opening a business account be cause Shawn is not 18.  tive date, if other than the date of filing:	ending any	other information, enter change(	s) here: (Attach addi	tional sheets, if necess	sary.)
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Filing Fee: \$25.00