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(Add	dress)	•
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(Do	cument Number)	
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FILED 2017 JAN 12 P 12: 2 SECRETARY OF STATE

D. BRUCE JAN 13 2017

## **COVER LETTER**

TO:

TO: Registration Division of C			
	e Kristi Stevenson, LLC		
SUBJECT: Name of Limited Liability Company			
	of Amendment and fee(s) are sub		
	John Stevenson	_	
		Name of Person	
	LuLaRoe Kristi Stevensor	n, LLC	
	**************************************	Firm/Company	
	29 Golf Club Dr		
		Address	
	Santa Rosa Beach, FL. 32	459	
		City/State and Zip Code	72.2
	stevensonstar@gmail.com		CLC 201
For further information	n concerning this matter, please of	(to be used for future annual report notificall;	ication) THE TARKS
John Stevenson		850 685-5008 at ( )	THE TO IT
Nam	e of Person		Telephone Number: 20
Enclosed is a check fo	r the following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ntions nter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LuLaRoe Kristi Stevenson, LLC			
(Name of the Limited Lia (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)		
The Articles of Organization for this Limited Liabilit		and as	signed
Florida document number L16000225374	·		
This amendment is submitted to amend the following	g• •		
A. If amending name, enter the new name of the	limited liability company here:		
Stevenson Enterprises, LLC			
The new name must be distinguishable and contain the words "	'Limited Liability Company," the designation "LLC" of	or the abbreviation "I	L.C."
Enter new principal offices address, if applicable:			
<u>(Principal office address MUST BE A STREET AL</u>	DDRESS)		
			<del></del>
Enter new mailing address, if applicable:			<del></del>
(Mailing address MAY BE A POST OFFICE BOX	0		<del></del>
B. If amending the registered agent and/or re		enter the name	of the new
registered agent and/or the new registered office	address nere:	2017 SELECT	
N 6N 50 1 1 1 1		7 JAN AHA	77
Name of New Registered Agent:		Sign I	
New Registered Office Address:		田~ ~	
	Enter Florida street address	77 70	
,	, Flor	ida N	<u>U</u>
	City	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 = MGR = AGREE	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
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		<b>→</b> •	
E. Effec	ctive date, if other than the date of filing:		
(Ifan e	effective date is listed, the date must be specific and cannot be prior to date of filing or more	(optional) than 90 days after filing.) Pursuan	t to 605,0207
	If the date inserted in this block does not meet the applicable statutory filing rement's effective date on the Department of State's records.	equirements, this date will not	be listed as
11000			
11000			
docu	ecord specifies a delayed effective date, but not an effective time	e, at 12:01 a.m. on the	earlier of
docu	ecord specifies a delayed effective date, but not an effective time e 90th day after the record is filed.	e, at 12:01 a.m. on the	earlier of
If the re	e sour day after the record is filed.	e, at 12:01 a.m. on the	earlier of
If the re	ecord specifies a delayed effective date, but not an effective time 90th day after the record is filed.	e, at 12:01 a.m. on the	earlier of
If the re	e sour day after the record is filed.	e, at 12:01 a.m. on the	earlier of

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00