

L1700000 1155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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RECEIVED

JUN 29 2020

AUG 26 2020

S. YOUNG

2020 AUG 26 PM 4:04

FILED



2020 AUG 25 PM 1:12

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 12, 2020

REBECCA WINFIELD
TWO ANGELS SOAP AND SHELLS, LLC
22348 OLEAN BLVD
PORT CHARLOTTE, FL 33952

SUBJECT: TWO ANGELS SOAPS AND SHELLS, LLC
Ref. Number: L17000001155

We have received your document for TWO ANGELS SOAPS AND SHELLS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity and other information must be composed or comprised solely of letters, numerals, characters, or symbols found on a standard American or U.S. qwerty keyboard. Please amend the document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 820A00015197

The errors has been amended.

Thank you.

Guicela Lopez

8-23-2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Two Angels Soaps and Shells, 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:

Rebecca Winfield

Name of Person

Two Angels Soaps and Shells, LLC

Firm/Company

22348 Olean Blvd.

Address

Port Charlotte, FL 33952

City/State and Zip Code

twoangelscreativeshells@gmail.com

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

For further information concerning this matter, please call:

Rebecca Winfield

352

556-6404

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
2020 AUG 26 PM 4:04

Two Angels Soap and Shells, 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 January 3, 2017 and assigned
Florida document number L17000001155.

This amendment is submitted to amend the following:

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

Two Angels Soaps, Gallery and Gifts, 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:

22348 Olean Blvd.

(Principal office address MUST BE A STREET ADDRESS)

Port Charlotte, Florida 33952

Enter new mailing address, if applicable:

22348 Olean Blvd.

(Mailing address MAY BE A POST OFFICE BOX)

Port Charlotte, Florida 33952

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:

22348 Olean Blvd.

Enter Florida street address

Port Charlotte

, Florida 33952

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	Rebecca Winfield	22348 Olean Blvd.	<input type="checkbox"/> Add
		Port Charlotte, FL 33952	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Vernon E Waldron	22348 Olean Blvd.	<input type="checkbox"/> Add
		Port Charlotte, FL 33952	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

amend the address to 22348 Olean Blvd., Port Charlotte, FL 33952

[illegible]

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

6-29-2020

Signature of a member or authorized representative of the organization

Signature of a member or authorized representative of a member