

L17000061027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

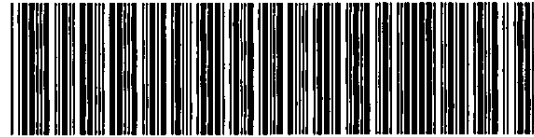
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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ALABAMA
ALABAMA, FLORIDA

APR 28 2017

✓ SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2017

THOMAS SEMIONE
868 BLANDING BLVD #103
ORANGE PARK, FL 32065

SUBJECT: COOL BREEZE TANNING, LLC
Ref. Number: L17000061027

We have received your document for COOL BREEZE TANNING, 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):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 217A00007190

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

Cool Breeze Tanning 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:

Thomas Semlone
Name of Person

Cool Breeze Tanning LLC
Firm/Company

5806 Silver Sands Cir
Address

Keystone Hqts, FL 32654
City/State and Zip Code

CARPORTSANYWHERE@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas Semlone
Name of Person

at (352)
Area Code

235-7171
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

RECEIVED
TALLAHASSEE, FLORIDA

2017 APR 24 PM 3:49

RECEIVED

45

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

Cool Breeze Tanning 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 Mar 16, 2017 and assigned
Florida document number L170000041027

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

, Florida

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	DANELLE L WOOD	3339 TURKEY CREEK DR	☐ Add
		GREEN Cove Springs, FL	☒ Remove
		32043	☐ Change
MGR	THOMAS L SEMIONE	5806 SILVER SANDS Cir.	☒ Add
		Keystone Hqts, FL	☐ Remove
		32656	☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

7 APR 2014
STATE OF FLORIDA
HALL COUNTY

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

17 APR 24 PM 4 08 J
U.S. AIR
MAIL
SECT. FLORIDA

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

4/20

4017

Signature of a member or authorized representative of a member

Typed or printed name of signee