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(((H17000252710 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP

Account Number : I20120000055 Phone : (407)898-1757 : (407)897-5336 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GUYM SISTERS LLC** 

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K. SALY

SEP 27 2017

### 4170002527103

#### **COVER LETTER**

TO:	Registration Se Division of Cor					
SUBJE	GUYM SIS	TERS LLC				
30016	CI	Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub- indence concerning this matter				
		LAILLA OLIVEIRA				
			Name of Person	<del></del>	<del>_</del>	
	ACCOUNT BOOKKEEPING CORPORATION					
			Firm/Company		<b>-</b>	
	5301 CONROY RD STE 140					
			Address		_	
		ORLANDO, FL 32811				
			City/State and Zip Code			
		support@abkcorp.com				
			to be used for future annual	report nonfreation)		
For furt	her information c	oncerning this matter, please of	ali:			
LAILL	A OLIVEIRA		407 at ( )	897-1757		
	Name o	f Person	Area Code	Daytime Telephone Number	±1	
Enclose	ed is a check for th	he following amount:				
\$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee of Certified Copy (additional copy is end	Certific (cosed)	ate of Status &	
	MAIL	ING ADDRESS:	STREE"	T/COURIER ADDRESS:		

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301

H170002527103

From Account Bookkeeping 1.321.888.4914 Tue Sep 26 12:01:51 2017 EDT Page 3 of 5

### ARTICLES OF AMENDMENT TO

2017500	
2017 SEP 25	تمد
2017 SEP 26 AM 9	:51
AM 9	

ART		ORGANIZATION OF	All All Sar OF Stay
GUYM SISTERS LLC			SEE PORT
(Name of the Limi	ted Liability Compa (A Florida Limited	nev as it now appears on our record Liability Company)	5.)
The Articles of Organization for this Limited L Florida document number L17000093674	iability Company	were filed on April 27,2017	and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name o	of the limited link	ility company here:	
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	6740 SEAGULL DR APT 309	
Principal office address MUST BE A STREE	ET ADDRESS)	BRADENTON FL 34210	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	5301 CONROY RD STE 140 ORLANDO FL 32811	
B. If amending the registered agent and registered agent and/or the new registered o			s, enter the name of the new
Name of New Registered Agent:	LINDAMIR T	ERESINHA VERBISKI	
New Registered Office Address:	6740 SEAGUL	L DR APT 309  Enter Florida street addres	
	BRADENTON		orida <sup>34210</sup>
	<del>-</del>	City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	16°	
hereby accept the appointment as registere or by some of all statutes relative to the pro-			

provisions of all statutes relative to the proper and complete performance of my duties, and a amiliar 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

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## From Account Bookkeeping 1.321.888.4914 Tue Sep 26 12:01:51 2017 EDT Page 4 of 5

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person heing added or removed from our records:

MGR = N $AMBR = A$	lanager outhorized Member		
Title	Name	Address	Type of Action
			□ Add
			□ Remove
			Change
			□ Acd
			□ Remove
			Change
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Page 2 of 3

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fective in effect	e date, if other than the rive date is listed, the data mus	date of filing:	not be prior to dat	e of filing or more th	(optional) said ofter the or	) Pursuant to 605.0	207 (3)(b)
ote: Li	the date inserted in this ble it's effective date on the De	ck does not meet	the applicable s	tantory filing requ	rirements, this date	will not be listed	as the
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reco	rd specifies a delayed	effective date	, but not an	effective time,	at 12:01 a.m.	on the earlier	rof:
The 9	Oth day after the reco	ord is filed.					
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	W	سمب	jui				
		Signature of a oxeral	per or authorized	representative of a n	эстирег		
	LINDAMIR TERESINE	A VERRISKA	- (				

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