Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062

Phone : (323) 962-8600 Fax Number : (323) 962-3889

**Enter the email address for this business entity to be used for 🛱 ture annual report mailings. Enter only one email address please 📆

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE BELLA BAMBINO NURSERY, LLC

Certificate of Status	()
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Electronic Filing Menu

Corporate Filing Menu

Help

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COVER LETTER

TO: Registration So Division of Cod						
THE BEL	LA BAMBINO NURSERY.	LLC				
VBJECT:Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.				
Please return all corresp	ondence concerning this matter t	o the following:				
	Cheyenne Moseley					
		Name of Person				
	Legalzoom.com. Inc.					
		Firm/Company				
	101 N. Brand Blvd., 11th Floor					
	Address					
	Glendale, CA 91203					
		City/State and Zip Code				
	Rhondanurserhine@aol.c		_			
	E-mail address: (to be used for future annual report notif	(Cation)			
For further information	concerning this matter, please ca	ıll:				
Cheyenne Moseley		800 773-0888 es				
Name	of Person	at () Area Code Daytink	e Telephone Numbæ			
Enclosed is a check for	the following amount:					
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55,00 Fitting 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

To:

Domitaker Hesoalty Centur

9042780034

OZZABZ POTZ OPCHA

162 P 0027004

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE BELLA BAMBINO NURSERY, LLC	e as it now appears on our records.)	
(Name of the Limited Liability Compan- (A Florida Limited Lia	ability Company)	
The Articles of Organization for this Limited Liability Company w Florida document number <u>L17000133060</u>	vere filed on <u>06/19/2017</u>	and essigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and end with the words "Limited Liabil	ity Company," the designation "LLC" or the	w 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 off	ice address on our records, ent	er the stame of the new
B. If amending the registered agent ann/or registered of registered agent and/or the new registered office address here	:	THE STATE OF THE S
Name of New Registered Agent:		70 H 17
New Registered Office Address:	Enter Florida street address	20
	, Florida	
	Cnv	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

From Baker Resentry Center

9042760034 07/18/2017 09/39

#162 P.003/004

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR - Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Britany N. Arnold	9098 Deconna Trail	Z Add
		Glen St. Mary, FL 32040	□ Кепиэ∨е
MGR	Rhonda L. Ameld	9098 Deconna Trail	Z Add
		Glen St. Mary, FL 32040	
			☐ Remove
			17 de la 18
			SSE Remove
			SA TO
			🗆 Кепюче
***	-		Add
			□ Remove

6042760034

#162 P 004/004

07/18/2017 09:40

EmmiBakor Bosontry Conter D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing:

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State) (optional) Dated __ Signature of a member or authorized representative of a member Rhonda L. Arnold Typed or printed name of signee 41

Page 3 of 3

Filing Fee: \$25.00