Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000203160 3)))



H1200000011603AECV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

	Fax Number : (850)617-6383	
	rax isumber 1 (057)	
From:		
	Account Name : EXPRESS CORPORATE FILING SERVICE INC.	
	Account Number : I20000000146	
	Phone : (305)444-4994	
	Fax Number : (305)444-4977	
**Enter t	he email address for this business entity to be used for f wal report mailings. Enter only one email address please.*	futur •

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LET'S TALK SKINNY LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

018 JUL 12 PM 3: 15

AD

JARTMEN. MVISICH OF CONT. TALLARASCEFE

Electronic Filing Menu

Corporate Filing Menu

Help

6 1 0

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LET'S TALK SKINNY LLC		
(Name of the Limited Liability Company (A Florica Limited Lia	ras it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company we Florida document number £17000244902 This amendment is submitted to amend the following:		and assigned
A. If amending name, enter the new name of the limited liability	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the obli	previation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		-
		σ,
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		·
8. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent	ice address on our records, enter	the name of the new
	 	
New Registered Office Acdress:	Enter Florido street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		3 - 223 - 18
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my alutes, and 1 um f provided for in Chapter 605, F.S. Or,	if this document is
and the second s		

If Changing Registered Agent, Signature of New Revistered Agent

er amenung Authorizen recson(s) anthorizen in manage, enter the mue, name, and adoress of each person velle anneg

MCR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Addre	<u>ess</u>	Type of Action
MGR	LUIS F. PEREZ	6073	NW 167th STREET	☐ Add
-		STE:	C-9	≅ Remove
		HIAL	EAH, FL 33015	☐ Change
MGR	JOSHUA P. FEREZ	6073	NW 167th STREET	
. 		STE:	C-9	□ Remove
		HIAL	EAH, FL 33015	: Change
		•	•	□ Add
				□ Remove
		· ·		Change
				□,Add
				П Кспюче
				☐ Change
<u></u>		· 		
			Liv C Remo	⊑y □ Remove
e.	•	·	□ Change	
··				□ Add
				□ Remove
				Change

					 -
	<u>.</u>				
<u></u>					_
			,		•
					
					
			•		
				ų.	;
					
Tective date, if other than the date on effective date is listed, the date must be Note: If the date inserted in this block focument's effective date on the Depa	te of filling: specific and co does not mee riment of Stat	mot be prior to da t the applicable e's records.	e of filing or more than statutory filing requir	(optional) 90 days after filing (Pu ements, this date wil	: rstiant to 605,0207 (I not be listed as t
e record specifies a delayed e The 90th day after the record	ffective dat I is filed.	re, But not an	effective time, a	t 12:01 a.m. on	the earlier of:
	1	2018			
Dared 7-12	7/				
Dared 7-12	fature of a me	mber or authorized	i representative of a mu	mber	