## 118000010943

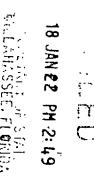
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## **COVER LETTER**

TO:	Registration Se Division of Cor			
enio n	Ladies Con			
SUBJI	ЕСТ:		nited Liability Company	<del></del>
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Eleanor Gilliam		
			Name of Person	
		Ladies Connect LLC		
			Firm/Company	
		4632 SE 28th ST		
		<u> </u>	Address	
		Ocala, FL 34480		
			City/State and Zip Code	<del></del>
		hungills@yahoo.com		
			to be used for future annual report notif	ication)
For fur	ther information co	oncerning this matter, please c	all:	
Eleano	or Gilliam		352 875-6131	
Name of Person		Area Code Daytime	e Telephone Number	
Enclose	ed is a check for th	e following amount:		
□ \$2:	5.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ladies Connect LLC			
( <u>Name of the Limited Lia</u> (A Flo	ibility Company as it now appears on our records.) orda Limited Liability Company)		
The Articles of Organization for this Limited Liability	y Company were filed on January 11,2018	and a	ssigned
Florida document number L18000010943			
This amendment is submitted to amend the following	y.		
A. If amending name, enter the new name of the l	limited liability company here:		
Baskets & Bows LLC			
The new name must be distinguishable and contain the words "l	Limited Liability Company," the designation "LLC" or the al	obreviation "	L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<del>-</del>		
		~ ~	
B. If amending the registered agent and/or re-	gistered office address on our records, enter	• • • • •	
registered agent and/or the new registered office a	ddress here:	<b>シャッ 2</b> 5	<del></del>
		SSE ~	pa
Name of New Registered Agent:		P. 19	
New Registered Office Address:			
	Enter Florida street address	<u>, (0)</u>	
	, Florida		
	City	Zin 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>	Address	Type of Action
MGR	Eleanor Gilliam	4632 SE 28th ST Ocala, FL 34480	■ Add
			□ Remove
			Change
AMBR	James A. Gilliam Jr.	4632 SE 28th ST Ocala, FL 34480	■ Add
			☐ Remove
			Change
<del></del>			
			Remove
			Change
		<del></del>	
			Remove
			Change
			Add
			Remove
			Change
			Remove
			□ Change

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ctive date, if other than the date of filing:		(optic	nal)	
effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be  If the date inserted in this block does not meet the ap	prior to date of filing or	more than 90 days after	filing.) Pursuant	to 605
ment's effective date on the Department of State's reco	ords.	ng requirements, tins	date witt not t	CHSC
ecord specifies a delayed effective date, but e 90th day after the record is filed.	not an effective	time, at 12:01 a	.m. on the o	earli
January 17th 2018				
	$\overline{\bigcirc}$			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00