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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

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## **COVER LETTER**

Division of Cor	porations		
Summer Cl SUBJECT:	assics Stores, LLC		
	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Leslic Estes		
		Name of Person	
		Firm/Company	
	3140 Pelham Parkway		
		Address	
	Pelham, AL 35124		
		City/State and Zip Code	
	leslice@summerclassics.co		
	E-mail address: (	to be used for future annual report notifi	cation)
For further information of	oncerning this matter, please co	all:	
Leslie Estes		205 358-9260 at ( )	
Name o	f Person		Telephone Number
Enclosed is a check for the	ne 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:

TO:

Registration Section

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

(Name of the Limited Liability Company as it now appears on our record (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 2 13/18	and assigned
Florida document number L18000039973	
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	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	0
(Principal office address MUST BE A STREET ADDRESS)	■
	MAY 2
	29 787 E
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2
	0 10 N
B. If amending the registered agent and/or registered office address on our record registered agent and/or the new registered office address here:	is, <u>enter the name of the ne</u>
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street addre	255
	lorida
City New Registered Agent's Signature, if changing Registered Agent:	Zip Code

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	Alyssa Carnahan		Add
			Remove
			Change
MGR	Gabriella White	3140 Pelham Parkway	<b>≡</b> Add
		Pelham, AL 35124	Remove
			□ Change
AMBR	William White IV	1104 West Adams Street	Add
		Jacksonville, FL 32204	☐ Remove
			Change
AMBR	William B White III	1104 West Adams Street	Add
		Jacksonville, Fl. 32204	☐ Remove
			☐ Change
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2018				
	cannot be prior to eet the applicab ate's records.	cannot be prior to date of filing or more eet the applicable statutory filing rate is records.  ate, but not an effective times at the statutory filing rate.	cannot be prior to date of filing or more than 90 days after the applicable statutory filing requirements, this after's records.  ate, but not an effective time, at 12:01 a.	(optional)  cannot be prior to date of filing or more than 90 days after filing.) Pursuant to be eet the applicable statutory filing requirements, this date will not be limite's records.  ate, but not an effective time, at 12:01 a.m. on the ear

Page 3 of 3

Typed or printed name of signce

Filing Fee: \$25.00