

L19 0000 46617

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

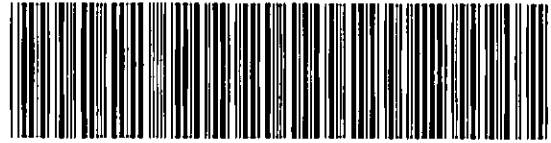
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800372154908

09/02/21--01008--025 \*\*30.00

SEP 2 2021 11:43

*JB*

August 20, 2021

IRS  
STOP 6055  
KANSAS CITY, MO 64999

To Whom It May Concern:

**SIZE BOUJEE, LLC** (EIN 83-3953304) has filed for a new name with the State of Florida. Please update our records to reflect the new name of **The Offbeat & Co. LLC**. The business address has been updated to

The Offbeat & Co. LLC  
Attn: Victoria Forsley  
1703 Americus Ave.  
Pensacola, FL 32507

Please contact me with any questions at 850-634-8075.

Sincerely,

Victoria Forsley

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SIZE BOUJEE LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

VICTORIA FORSLEY

\_\_\_\_\_  
Name of Person

SIZE BOUJEE LLC

\_\_\_\_\_  
Firm/Company

1703 AMERICUS AVE

\_\_\_\_\_  
Address

PENSACOLA, FL 32507

\_\_\_\_\_  
City/State and Zip Code

VICTORIAFORSLEY@GMAIL.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VICTORIA FORSLEY

850 634-8075  
at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

SIZE BOUJEE LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2/15/2019 and assigned  
Florida document number L19000046617.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

THE OFFBEAT & CO. LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

1703 AMERICUS AVE

PENSACOLA, FL 32507

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

1703 AMERICUS AVE

PENSACOLA, FL 32507

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

VICTORIA FORSLEY

New Registered Office Address:

1703 AMERICUS AVE

*Enter Florida street address*

PENSACOLA

Florida 32507

*City*

*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.*

*Victoria Forsley*

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**

Title	Name	Address	Type of Action
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input checked="" type="checkbox"/> Add Not Selected
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change Not Selected
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

931 SEP -2 AM 11:44

201-2-11:44

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated AUGUST 20 2021

Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**