119000302512

(Re	questor's Name)	
Ç	,	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ie)
	A November 2	
(DC	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400341193014

03/88/20--01985--008 **25.00

2020 MAR -6 AM IO: 35

COVER LETTER

ΓΟ: Registration Section Division of Corporations	
SUBJECT: Treusures: Threals Boutque 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:	
Durlene M. Marshall Name of Person	
Firm/Company	
3922 Arbor Mill Circle	
Orange Part, FL 32065 City/State and Zip Code darlene. rivercity@gmail.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Dorlene M Mc+5hall at (904) 403-5585 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \text{\$\$30.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigcup \text{\$\$additional copy is enclosed}\$\$\$ Certified Copy (additional copy is enclosed)\$\$\$ Certified Copy (additional copy is enclosed)\$\$\$}	
Mailing Address: Street Address:	

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

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

Treasures : Threads	Boutique LLC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000301513</u> .	were filed on 12 18 19	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
Darlene M. Marshall	L.L.C.	5/2 29
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or t	1 ()
Enter new principal offices address, if applicable:		MAR AHA
(Principal office address MUST BE A STREET ADDRESS)		-6
		me z
		0.00
Enter new mailing address, if applicable:		35 35/17/17/19/19/19/19/19/19/19/19/19/19/19/19/19/
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	
The state of the s		
B. If amending the registered agent and/or registered office a	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:		
New Registered Office Address:		
	Enter Florida street address	
	. Florid	a
	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.

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>	Name	<u>Address</u>	Type of Action
			□ Add
			□Remove
			□Change
			□Remove
<u></u>			TAGdd 78EC
			SECRETARY OF STATE TALLAHASSEE, FLORID
			Change: Change
			□ Change
			\ _Add
			Remove
			□ Add
			□Remove
			□Change

		· · · · · · · · · · · · · · · · · · ·				
	•					
.						
						 -
						
······································						
		 				
	<u>-</u>				ĮĄĮ.	2020
					LAH	
		 			ASSE	
					<u> </u>	
					0.7.7.6 0.1.60 0.1.60	<u>δ</u> (3
				· · ·		<u>~~</u>
	<u></u>					
ective date, if other n effective date is listed, to the lifthe date incorter	he date must be speci	ific and cannot be pri		or more than 90 days a		
te: If the date inserted cument's effective date				mig requirements,	uns date will he	n oc listed a
ecord specifies a delay	ed effective date. h	ut not an effective	time at 12:01 a	m on the earlier of	· (b) The 90th	day after the
is filed.	ou circonve dute, o	at not an effective	, time, at 12.01 a.	m, on the earner of	. (o) The your	day anci inc
1	2	, 202	<u>O</u> .			
ted03 (2						
ted 03 Q	3 Darle 1	m Mar 1	X			