L21000126924

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SECSETARY OF STATE

A. BUTLER FEB 25 2022

COVER LETTER

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SURJECT: New Bu	isiness Name!	Cool Shades C	ustom Shop LLC
3000 <u>1</u>	Name of Lim		- 2022 JAN 12 AM 8: 0 I
			SECRETARY OF STATE
The enclosed Articles of Ar	mendment and fee(s) are sub	omitted for filing.	MCCMM35EL, FE
Please return all correspond	ence concerning this matter	to the following:	
	Anny Ph	Name of Person	
SUBJECT: New Business Name ! COO Shades Custom Stop LLC Name of Limited Liability Company SEGRETARY GF STATE TALLAHASSEE, FL The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Any Phortharest Name of Person Cool Shades Custom Shop LLC Firm/Company L311 36th Atc North Address St. Peterstory Ft 33713 City/State and Zip Code Query houther/ong @ Notmail.com B-mail address: (to be used for furfree annual report notification) For further information concerning this matter, please call: Anny Phortharest Name of Person at 727 Name of Person Tallahassee Mailing Address: Registration Section Division of Corporations P.O. Box 6327 The Centre of Tallahassee			
	2311 36th	3 4 4 .	
		Address	
	St. Peters	iburg. Fl 33713	•
		City/State and Zip Code	_
	ahnypho	uthavona @ hotma	il.Com
For further information con-		·	ancaton)
Annu Phonth	avong	31/727 \ 999	n-4701
Name of P	erson		me Telephone Number
Enclosed is a check for the	following amount:		
25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
-		_	
P.O. Box 6327		The Centre of	Tallahassee
Tallahassee, FL	32314	2415 N. Monr Tallahassee, F	

ARTICLES OF AMENDMENT OT ARTICLES OF ORGANIZATION **OF**

Cool Shados Baby LLC
(Name of the Limited Liability Company as it now amilias son our records) 8: 55 (A Florida Limited Liability Company)
SECRETARY OF STATE
1 41
Florida document number
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Cool Shades Custom Shop LLC
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
3. If amending the registered agent and/or registered office address on our records, enter the name of the new regist
gent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, Florida
City Zip Code
lew Registered Agent's Signature, if changing Registered Agent:
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Remove
			□Change
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ective date, if other than n effective date is listed, the date te: If the date inserted in the cument's effective date on the	is block does not meet	the applicable statuto	1 2022 ing or more than 90 ory filing requirem	(optional) days after filing.) Pursua ents, this date will no	nt to 605.020 t be listed a
cord specifies a delayed effe s filed.	ective date, but not an	effective time, at 12:0	l a.m. on the earli	er of: (b) The 90th o	iay after the
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		ber or authorized repres	entative of a membe	r	



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FLORIDA DEPARTMENT OF STATE 2022 FEB - 7 PM 1:41

Division of Corporations

SECRETARY OF STATE TALLAHASSEE, FL

January 21, 2022

AMY PHOUTHARONY 2311 36TH AVE NORTH ST. PETERSBURG, FL 33713

SUBJECT: COOL SHADES BABY LLC

Ref. Number: L21000126924

We have received your document for , however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 922A00001640

Anissa Butler Regulatory Specialist II

www.sunbiz.org