

121000431470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

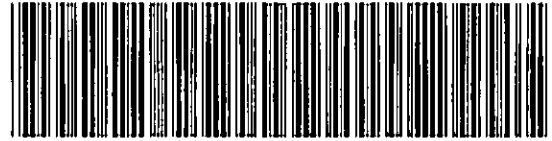
(Document Number)

Certified Copies _____ Certificates of Status _____

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Title

Office Use Only



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12/13/21--01014--002 **25.00

A. BUTLER
JAN 19 2022

COVER LETTER

page 1

TO: Registration Section
Division of Corporations

SUBJECT:

Babes E Minks 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:

Alexandria Nicole Cokley

Name of Person

Babes E Minks LLC

Firm/Company

3730 A Creswick Circle

Address

Orange Park FL 32065

City/State and Zip Code

cna.nicole@babesandminks.com

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

For further information concerning this matter, please call:

Alexandria N. Cokley

Name of Person

at (904) 316-3081

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**

PABES E WINKS 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 10/01/2021 and assigned
Florida document number L2100431470.

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" or the abbreviation "LLC."

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)

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:

New Registered Office Address:

Enter Florida street address

_____, **Florida**
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:

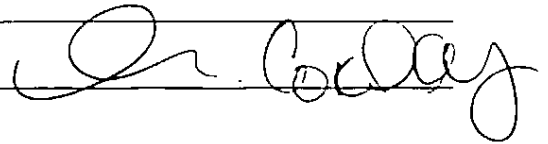
MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Alexandria Nicole Cokley	3730 ^A Creswick Circle	<input checked="" type="checkbox"/> Add
		Orange Park FL 32065	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Daxanne McCoy	3730 ^A Creswick Circle	<input checked="" type="checkbox"/> Add
		Orange Park FL 32065	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Tyisha A. Hayward	4371 Collins Rd Apt 706	<input type="checkbox"/> Add
		Jacksonville, FL 32244	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I 'we' HAVE ATTACHED A NOTARIZE LETTER along with documents of former business 'Authorized member' Tyelisha A. Hayward, on behalf of the courts I "we" are requesting Tyelisha A. Hayward to be remove from 'Babes & Minks LLC' Due to financial issues Tyelisha A. Hayward no longer wants to be associated with Babes & Minks LLC. Leaving "MG RM" ALEXANDRIA N COKEY & "MG RM" REYANUE MCCOY "Authorized members" of 'Babes & Minks LLC'. Please see attached notarize letter from all parties associated to Babes & Minks LLC



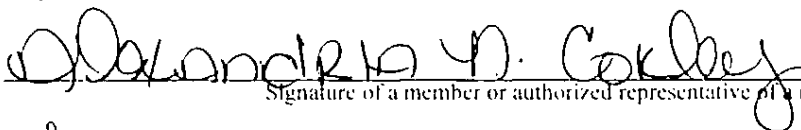
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 01/11/2022



Signature of a member or authorized representative of a member

Alexandria N. Cokley

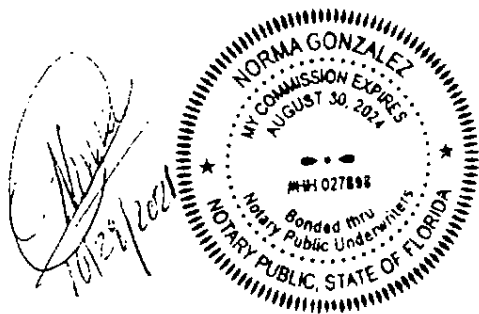
Typed or printed name of signer

PAGE 2
01/11/22

I have attached documents that needed to be corrected. Also original documents that was sent first.

Thank you
Alexandra W. Coley

I Tyeisha Hayward no longer want to be
A part of Babes & Minks LLC. Due to financial
issues, I have requested to have my name
remove off all documents. Signing this
notarize statement I opt out of all
responsibilities associated with babes & minks llc
leaving Alexandria N. Cokley and Rexanne McCoy
owners and on the documents for the
LLC for Babes & Minks LLC.



Rexanne McCoy
Rexanne McCoy 10/29/2021

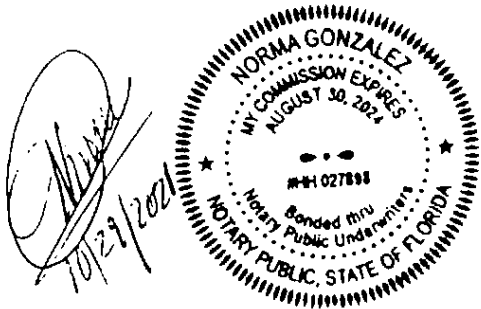
Alexandria N. Cokley
10/29/2021

Tyeisha Hayward
10/29/21

Alexandria Cokley
Witness of signature.

Alexandria N. Cokley

I Tyeisha Hayward no longer want to be
apart of Babes & Minks LLC. Due to financial
issues, I have requested to have my name
remove off all documents. Signing this
notarize statement I opt out of all
responsibilities associated with Babes & Minks LLC
leaving Alexandria N. Cokley and Rexanne McCoy
owners and on the documents for the
LLC for Babes & Minks LLC.



Rexanne McCoy Rexanne McCoy

Rexanne McCoy 10/29/2021

Alexandria N. Cokley A. Cokley

10/29/2021

Tyeisha Hayward Tyeisha Hayward

10/29/21

Alexandria Cokley A. Cokley
Witness of signature.

Alexandria N. Cokley



RECEIVED

FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 JAN 14 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FL

December 27, 2021

ALEXANDRIA N. COKLEY
3730 A CRESWICK CIR
ORANGE PARK, IL 32065

Ref. Number: L2100431470

We have received your document for and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 621A00031095