

W22000302310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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07/22/22--01023--002 \*\*25.00

**FILED**  
**Feb 06, 2023 08:00 AM**  
**Secretary of State**

FEB 11  
S. PRATHER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 27, 2022

THE GIRLS CO. LLC  
450 SEVILLE PARKWAY  
ST AUGUSTINE, FL 32086

SUBJECT: THE GIRLS CO. LLC  
Ref. Number: L22000302310

We have received your document for THE GIRLS CO. LLC 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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) 245-6939.

Stacy Prather  
Regulatory Specialist III

Letter Number: 922A00028811

recd - 6/28/23

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** The Girls Co. 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:

**FILED**  
**Feb 06, 2023 08:00 AM**  
**Secretary of State**

Stephanie M. Torres

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

Girls Co. LLC

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

450 Seville Parkway

\_\_\_\_\_  
Address

Saint Augustine, Florida 32086

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

thegirlscollc@gmail.com

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

For further information concerning this matter, please call:

Stephanie M. Torres                      203                      589-8822  
\_\_\_\_\_  
Name of Person                      at (                      )                      Daytime Telephone Number  
Area Code

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

**FILED**  
**Feb 06, 2023 08:00 AM**  
**Secretary of State**

The Girls Co. 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 07/06/2022 and assigned-  
Florida document number L22000302310.

This amendment is submitted to amend the following:

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

~~Girls Co. LLC~~ Credit Matters LLC - Stephanie Torres 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)

**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*

*City*

Florida

*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

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

[illegible]

(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)

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 July 13, 2022

Stephane M. Jones  
Signature of a person

Signature of a member or authorized representative of a member

Stephanie M. Torres

Typed or printed name of signee

**Filing Fee: \$25.00**