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12/10/2010 14:43:17 TEL 853721352
Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : LEVINE & PARTNERS, P.A.
Account Number : 074677001117
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Fax Number : (305) 372-1352

FILED
10 DEC 10 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: gsr@levine-lawfirm.com

RECEIVED
10 DEC 10 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
STYLES HOLDINGS, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$60.00

K. SALLY
EXAMINER
DEC 13 2010

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: Styles Holdings, LLC *M02000001417
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: 06/04/2002

FILED
10 DEC 10 AM 11:55
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 12/06/2010
5. New name of the limited liability company: The Styles Group, LLC
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of a member or the authorized representative of a member

Paul A. Levine, authorized representative
Typed or printed name of signee

Filing Fee: \$25.00

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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "STYLES HOLDINGS, LLC", CHANGING ITS NAME FROM "STYLES HOLDINGS, LLC" TO "THE STYLES GROUP, LLC", FILED IN THIS OFFICE ON THE SIXTH DAY OF DECEMBER, A.D. 2010, AT 10:12 O'CLOCK A.M.

3037135 8100

101150217

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8401431

DATE: 12-06-10

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12/10/2010 14:45 TEL 3053721352

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State of Delaware
Secretary of State
Division of Corporations
Delivered 10:24 AM 12/06/2010
FILED 10:12 AM 12/06/2010
SRV 101150217 - 3037135 FILE

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: Styles Holdings, LLC

2. The Certificate of Formation of the limited liability company is hereby amended
as follows: The name shall be changed to: The Styles Group, LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on
the 6th day of December, A.D. 2010.

By: /s/ Paul C. Steinfurth
Authorized Person(s)

Name: Paul C. Steinfurth
Print or Type

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