

L12000084106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

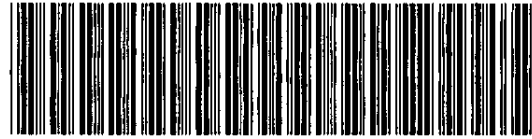
(Document Number)

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FILED  
13 AUG 16 PM 5:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CONSUELLA LACHELL BAILEY, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CONSUELLA BAILEY  
Name of Person

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

104 SHERWOOD DRIVE  
Address

ROYAL PALM BEACH, FL 33411  
City/State and Zip Code

cbrealstatenews@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CONSUELLA BAILEY at ( 561 ) 420-2127  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 29, 2013

CONSUELLA BAILEY  
104 SHERWOOD DRIVE  
ROYAL PALM BEACH, FL 33411

SUBJECT: CONSUELLA LACHELL BAILEY, LLC  
Ref. Number: L12000054106

We have received your document for CONSUELLA LACHELL BAILEY, 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):

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

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) 245-6051.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 213A00018261

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**CONSUELLA LACHELL BAILEY 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 April 23, 2012 and assigned Florida document number L12000054106.

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 end with 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) \_\_\_\_\_

\_\_\_\_\_ P.O. BOX 213534

\_\_\_\_\_ ROYAL PALM BEACH, FL 33421

**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*

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TALLAHASSEE, FLORIDA

**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 608, 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**

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

**PLEASE INCLUDE EIN# 45-5121033**

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Dated **AUGUST 8**, **2013**



Signature of a member or authorized representative of a member

**CONSUELLA BAILEY**

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**



OGDEN UT 84201-0038

In reply refer to: 0441789191  
July 15, 2013 LTR 147C 0  
45-5121033 000000 00  
00006204  
BODC: SB

CONSUELLA LACHELL BAILEY LLC  
CONSUELLA BAILEY SOLE MBR  
104 SHERWOOD DR  
ROYAL PLM BCH FL 33411-8209



05526

Employer Identification Number: 45-5121033

Dear Taxpayer:

Thank you for your inquiry dated July 02, 2013.

Your Employer Identification Number (EIN) is 45-5121033. Please keep this letter in your permanent records. Enter your name and EIN on all federal business tax returns and on related correspondence.

If you need forms, schedules, or publications, you can obtain them by visiting the IRS web site at [www.irs.gov](http://www.irs.gov) or by calling toll free at 1-800-TAX-FORM (1-800-829-3676).

Please call our toll-free telephone number at 1-800-829-0115 with any questions you may have.

You also can write to us at the address shown at the top of this letter's first page.

When you write to us, please attach this letter and, in the spaces below, give us your telephone number with the hours we can reach you in case we need more information. You also may want to keep a copy of this letter for your records.

Telephone Number ( ) \_\_\_\_\_ Hours \_\_\_\_\_

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.