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SECRETARY OF STATE
ATTACKSEF, FLORIDA

## **COVER LETTER**

TO:

**Registration Section** 

Division of Corporations					
SUBJECT:	IJF IM	IAGIES, LLC			
	Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	IRENE J. FARANO				
	Name of Person				
	Firm/Company				
	618 SE 35TH STREET				
	Address				
	CA	APE CORAL, FL 33904			
		City/State and Zip Code			
	DEM	METRI@HMRCPA.NET	*!		
		to be used for future annual report notifica	1101)		
For further information	concerning this matter, please o	call:			
DEMETRI ANTONAKAKIS			22-4854		
Name	of Person	Area Code & Daytime T	elephone 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:		STREET/COURIE	R ADDRESS:		
Registration Section		Registration Section Division of Corporations			
Division of Corporations P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 10 MAR 22 PM 12: 29

		SECRETARY	DE CEAR		
(1)	IJF IMAGIES, LLC ability Company as it now appe	SECRETARY TALLAHASSEI ears on our records.)	S. FLADIDA		
( <u>Name of the Limited Li</u> (A Fl	orida Limited Liability Company	)	LONIDA.		
		****			
The Articles of Organization for this Limited Liab	ility Company were filed on	MARCH 8, 2010	and assigned		
Florida document numberL1000002546	<u>66                                   </u>				
This amendment is submitted to amend the follow	ing:				
A. If amending name, enter the new name of th	e limited liability company h	ere:			
IJF	ART MARKETING, LLC				
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Com	pany," the designation "LL	.C" or the abbreviation		
Enter new principal offices address, if applicab	le:		<del></del>		
(Principal office address MUST BE A STREET)	ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BC	<u> </u>				
<del></del>					
B. If amending the registered agent and/or		our records, enter th	e name of the new		
registered agent and/or the new registered offic	<u>e address here</u> :				
Name of New Registered Agent:			<del></del>		
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 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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or-Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** <u>Address</u> Type of Action <u>Name</u> ☐ Add Remove Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MARCH 8 2010 Dated \_ Signature of a member or authorized representative of a member IRENE/JJFARANO Typed or printed name of signee

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Filing Fee: \$25.00