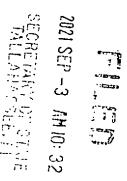
K160001193533

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	lv



800372155738

09/08/21--01039--025 **25.00



COVER LETTER

SUBJECT: Proc	sect Moment	Designs L.L.C.	
	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
•	J	-	
	Jessia	a Syntander Name of Person	
		Name of Person	-
	Jessiia S	<u>Gntander L.L.C.</u> Firm/Company	
		Firm/Company	
	8334 Petsy	St.	
		S+, Address	
	Tamba FL	33615 City/State and Zip Code	
	<u> </u>	City/State and Zip Code	
	into @ Jessica	Santander, com to be used for future annual report no	
	E-mail address: (t	to be used for future annual report no	tification)
For further information c	oncerning this matter, please ca	all:	
Jess ra	Santander	at (_30\) Area Code Daytic	9443
Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is a check for the	ne 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

Registration Section Division of Corporations

TO:

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

(Name of the Limited Liability Con	150 S C.C.C.	n our records.)	
(A Florida Limit	ed Liability Company)		
The Articles of Organization for this Limited Liability Compa Florida document number <u>L18000 1935 33</u> .	iny were filed on $\frac{3}{}$	13/3031	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here	:	
Jessica Santander L.L.C.			
The new name must be distinguishable and contain the words "Limited Li	ability Company," the desig	mation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	2021
			S S
			1 2222
Enter new mailing address, if applicable:			ယ ႏ
(Mailing address MAY BE A POST OFFICE BOX)		m-,	
			 ω Ν
		+71	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ce address on our reco	rds, <u>enter the name o</u>	f the new registere
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida	street address	
		, Florida	
	City·		Zip Code
New Registered Agent's Signature, if changing Registered Age	<u>nt:</u>		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent of being filed to merely reflect a change in the registered offi- company has been notified in writing of this change.	ete performance of my is provided for in Cha	duties, and I am fam pter 605, F.S. Or, if t	iliar with and his document is

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>	Address	Type of Action
			□Add
			□Change
			□ Remove Column Column
			SECRITARY J. S.
		· 	rri N □Change
			☐Add
			□Remove
			□Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□Remove
			Change
			□Remove

							_
	<u> </u>		· · · - · · ·	· ·			
		<u>. </u>					_
		· -					_
							
		- 					_
							_
				<u> </u>			_
					<u> </u>	2021	_
						SEF	
						ည်	i Trans
					9000 E 7	3	
		<u>. </u>				HID:	
					<u>ੂੰ ਜੀ</u> 	32	_
							_
	other than the date	oes not meet the app	licable statutory filing	ore than 90 days afte			
lote: If the date is	nserted in this block do we date on the Departr	ment of State 8 record	us.				
ote: If the date is becument's effection record specifies a				on the earlier of: (l	o) The 90	Oth day af	ter the
lote: If the date is ocument's effection record specifies a lis filed.	ve date on the Departr delayed effective date			on the earlier of: (l	5) The 90	Oth day af	ter the
lote: If the date is ocument's effecti	ve date on the Departr delayed effective date 3 \	e, but not an effective			5) The 90	Oth day af	ter the