## 122000177094

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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SECRETARY OF STATE
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OF CORPORE AT ION

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## COVER LETTER

TO: Registration So Division of Cor				
	TTERY, ELC		·	
Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Kristen Drummond			
		Name of Person		
	K.D.'S Pottery, LLC			
		Firm/Company		
	3195 Beaver Creek Dr			
		Address		
	Havana Fl 32333			
		City/State and Zip Code		
	kristenian@outlook.com	<u>.</u>		
For further information of	E-mail address: ( concerning this matter, please c	to be used for future annual report not	tification)	
Kristen Drummond	<i>y</i>	954 235-6431		
Name o	of Person	at () Area Code Dayti	me Telephone Number	
Enclosed is a check for the	he 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 (		Street Address: Registration S	ection	
Division of C	Corporations	Division of Co	orporations	
P.O. Box 632		The Centre of		
Tallahassee,	ГL 32314	2413 N. Monr	oe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

K.D.'S Pottery, LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	npany as it now appears on our records. ed Liability Company)	)
The Articles of Organization for this Limited Liability Compa	ny were filed on	and assigned
lorida document number L22000177094		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited li	ability company here:	
. DRUMMONDS POTTERY, LLC		
he new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC"	or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Inter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
Mailing address MAY BE A POST OFFICE BOX)		
	· · ·	
<ol> <li>If amending the registered agent and/or registered office gent and/or the new registered office address here:</li> </ol>	ee address on our records, <u>enter t</u>	he name of the new registe
Name of New Registered Agent:	· <u>···</u>	<del></del>
New Registered Office Address:	Enter Florida street address	
	enier r ioriaa sireel adaress	
		rida
	City	Zin 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 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
			□Remove
			□Change
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			Change

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Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this blocument's effective date on the Do	t be specific and cannot be prior to da ock does not meet the applicable	ite of filing or more than 90 days a	ilter filing.) Pursuant to 605.0207
record specifies a delayed effective d is filed.	e date, but not an effective time,	at 12:01 a.m. on the earlier of	(b) The 90th day after the
August 9	. 2022		
	Muse of a member or authorized	d representative of a member	
Kristen Drummond		,	
Kristen Drummond	Typed or printed na	me of signce	

Filing Fee: \$25.00