L22000352169



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(City/State/Zip/Phone #)
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: SV Creative LLC - Name Change Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Anthony Velazquez Name of Person
SV Creative LLC Firm/Company
4605 NW 83rd Path
Doral, FL 33100 City/State and Zip Code
anthony. velazquez 008@gmail. Con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Huthony Velazquez at (305) 3016102 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Solution Sta
Mailing Address: Registration Section Street Address: Registration Section
Division of Corporations Division of Corporations

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

SV Creative LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on c Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000352169</u> .	were filed on D8	10 9039	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
Roseway Collective LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designa	ttion "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			024
		£	<u>(1)</u>
	-	21 21 24	(A) (C)
Enter new mailing address, if applicable:		\$5:	
(Mailing address MAY BE A POST OFFICE BOX)		ڔٛڗڔڔ	σ
		r	(c)
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	ls, <u>enter the name (</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			_
	Enter Florida su	cet address , Florida	
	City		Zip Code
Minus Phantagon I de la 1800 de			

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 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> Fitle</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			□Remove
			🖸 Add
			□ Remove
			□Change
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			□ Change

	
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	-
	date, if other than the date of filing:
ote: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as is effective date on the Department of State's records.
record s is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	
	Signature of a stember or authorized representative of a member
	AN erom