

LO 6000000 8880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

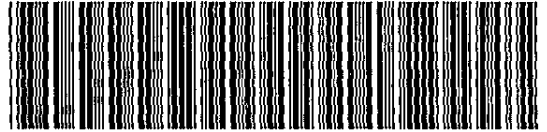
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Art of High Design
(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:

FILED
2006 APR 29 PM 4:08
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Lanita R. Stallings
(Name of Person)

The Art of High Design
(Firm/Company)

2522 Capital Circle N E Suite 11
(Address)

Tallahassee, FL 32308
(City/State and Zip Code)

For further information concerning this matter, please call:

Lanita R. Stallings at (850) 421-6454
(Name of Person) (Area Code & Daytime Telephone 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:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

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

The Art of High Design

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 1/25/2006 and assigned
document number L06000008880

SECOND: This amendment is submitted to amend the following:

Article IV

Removal of Manager Judy S. Jones

1354 Lawndale Road

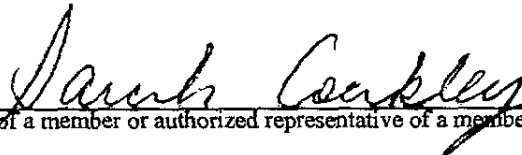
Tallahassee, FL 32317

Addition of Manager Andrea S. Cohen

8949 Winged Foot Dr.

Tallahassee, FL 32312

Dated April 26, 2006



Signature of a member or authorized representative of a member

SARAH COAKLEY

Typed or printed name of signee

2006 APR 26 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Filing Fee: \$25.00

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: The Art of High Design

2. The mailing address of the limited liability company is : 2522 Capital Circle N E Suite 11
Tallahassee, FL 32308

1/25/2006
3. Date of filing/registration in Florida

L06000008880
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Judy S. Jones
Name
2522 Capital Circle NE Suite 11
Address
Tallahassee, FL 32308
City, State and Zip

6. The name and address of the new registered agent and/or office:

Lanita R. Stallings
Name
11954 Woodville Highway
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32305
City, State and Zip

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TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Sarah Coakley
(Signature of a member or authorized representative of a member)

Sarah Coakley
(Printed or typed name of signer)

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.

Lanita R. Stallings
(Signature of Registered Agent)

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