Division of Corporations

## Florida Benartment of State Privision of Corporation Electronic Filing Ceven Sincet

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To		

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TAX CARE CELEBRATION

Account Number : I20190000007 Phone : (786)845-8854 Fax Number : (321)473-3052

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Justica. torres @ taxcarcine.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SWAG STUDIO LLC

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## **COVER LETTER**

TO: Registration S Division of Co		•	•
	STUDIO LLC		
SUBJECT:	Name of Lim	ited Liability Company	
		in 16 60 a	
	f Amendment and fec(s) are sub		
Please return all corresp	ondence concerning this matter	to the following:	
	JESSICA TORRES		
	<del> </del>	Name of Person	
	TAX CARE DORAL		
		Firm/Company	
	1400 NW 107TH AVE ST	E 203	
		Address	· · · · · · · · · · · · · · · · · · ·
	SWEETWATER FL 3317	2	
		City/State and Zip Code	
	JESSICA.TORRES@TAX		
	E-mail address: (	to be used for future annual report notif	fication)
For further information	concerning this matter, please c	all:	
JESSICA TORRES		786 845-8854 at ()	
Name	of Person	Area Code Daytina	e Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Section Corporations	Street Address: Registration Sec Division of Cor	porations
P.O. Box 63 Tallahassee.		The Centre of T 2415 N. Monro Tallahassec, FL	e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021 JUH -9	1 11
PH 3: (	<b>'</b>

SWAG STUDIO LLC		<u></u> س
(Name of the Limite	d Liability Company as it now appears on our records.) A Fiorida Limited Liability Company)	. 05
The Articles of Organization for this Limited Li	ability Company were filed on JUNE 4 2021	and assigned
Florida document number L21000261596	·	
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
DE SWAG STUDIO LLC		
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation "LLC" or the	bbreviation "L.L.C."
Enter new principal offices address, if applica	ible.	
, ,	<del></del>	
Principal office address MUST BE A STREE	(ADDRESS)	
Enter new mailing address, if applicable:	**************************************	
Mailing address MAY BE A POST OFFICE E	30X)	
B. If amending the registered agent and/or re	gistered office address on our records, enter the nar	ne of the new regist
gent and/or the new registered office address	here:	
Name of New Registered Agent:		<del>7                                    </del>
New Registered Office Address:		
	Enter Florida street address	
	Dioxida	
	, Florida	Ziv 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

Title	<u>Name</u>	Address	Type of Action
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fective date, if other than t	se date of filing:			(optional)	
an effective date is listed, the date m	ust be specific and canno	t be prior to date	of filing or more than	90 days after filing.) P	ursuant to 605.0207
ote: If the date inserted in this ocument's effective date on the	Department of State's	records.	tutory ming requi	ements, this date wi	il mor de listed as
record specifies a delayed effect is filed.	ive date, but not an ef	fective time, at	12:01 a.m. on the o	earlier of: (b) The 9	0th day after the
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ated	Signature of thembe	ofen .	presentative of a me	mb <del>er</del>	

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