LU5000009602

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



900275604749

08/03/15--01031--001 **25.00



AUG 04 2015 J SHIVERS

COVER LETTER

Division of Corporations
SUBJECT: <u>Artist Brushstrokes</u> , LLC 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:
Laurent Pierre, Tr
Artist Brush strokes, LLC
145455 Military Trail #154
Delray Beach, FL 33484 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Laurent Pierre Tr at (877) 321-2787 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$\$ Certificate of Status & Certified Copy (additional copy is enclosed)\$\$\$\$\$\$\$\$ 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
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STREET/COURIER ADDRESS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Artist Brush strokes, L	LC	
(<u>Name of the Limited Liability Company a</u> (A Florida Limited Liabi	s it now appears on our records.) lity Company)	
The Articles of Organization for this Limited Liability Company wer Florida document number <u>L0500009602</u> .	re filed on 1/31/2100S	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
orida document number LOSOOOO9602. his amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: He new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 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) If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City Florida City		
Enter new principal offices address, if applicable:	-	
(Principal office address MUST BE A STREET ADDRESS)		
	e address on our records, ent	er the name of the new
registered agent and/or the new registered office address here:		Fice
Name of New Registered Agent:		15 A
New Registered Office Address:	Enter Florida street address	17. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18
		P P TT
New Registered Agent's Signature, if changing Registered Agent:	City	ON Zip Gode
I hereby accept the appointment as registered agent and agree t provisions of all statutes relative to the proper and complete per		

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 = Ms $AMBR = As$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Carmen a. Charles		Add
		14545 5 Military Trail #154 Delray Beach, FL 33484	Remove
			Change
MGR	Sebastien Pierre	145455 Military Torail +159 Delray Beach, FL 33484	Add
			□ Remove
			Change
			□ Add
		□ Remove	
		□ Change	
			□ Add
			□ Remove
			🗖 Change
			□ Add
		□ Remove	
		***************************************	Change
			Add
			Remove
			□ Change

	···		_
			_
			_
· ··· ·			
	· · · · · · · · · · · · · · · · · · ·		
•			
		•	
	,		
·	n. 11 2 1111		
	<u>></u> (r)	귥	H
	<u> </u>	and a	
	ASSET	ည်	TORONA ME
	·	7	3.3
	<i>C</i> 0:	-:-	Waterian Sangle S
Figure data is about the data of Silver		#	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than a Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	(optional) 90 days after filing.) Pursements, this date will	nuant to	605.0207 (3) listed as the
the record specifies a delayed effective date, but not an effective time, and the solution of	t 12:01 a.m. on t	he ea	rlier of:
Dated July 28, 2015.			
Signature of a member or authorized representative of a men	nhar		
Laurent Pierre Typed or printed name of signee	invet		
1 . 1 1/2 . 1 1/2			

Page 3 of 3

Filing Fee: \$25.00