

LD5000057502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CREATIVE MAILBOX DESIGNS, 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:

PAUL WILBUR

Name of Person

CREATIVE MAILBOX DESIGNS, LLC

Firm/Company

12801 COMMODITY PLACE

Address

TAMPA, FL 33626

City/State and Zip Code

PAUL@CREATIVESIGNDESIGNS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL WILBUR

813 749-2304
at ()

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**

CREATIVE MAILBOX DESIGNS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on JUNE 9, 2005 and assigned
Florida document number L05000057502.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. 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

_____, Zip 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. 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

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JUN 29 PM 3:23
TARY OF STATE
ASSEMBLY
FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
VP	JEFF CROSKEY	12801 COMMODITY PLACE	<input type="checkbox"/> Add
		TAMPA, FL 33626	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	TOM HUGHES	12801 COMMODITY PLACE	<input checked="" type="checkbox"/> Add
		TAMPA, FL 33626	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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 TALLAHASSEE, FLORIDA

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of the organization

JAMES E. HARDEN, JR

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2016 FEB 29 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Board of Members Corporate Resolution of Creative Mailbox Designs, LLC

We, the undersigned, being all the members of Creative Mailbox Designs, LLC (the "Company") consent and agree that the following corporate resolution was made on November 30th, 2015 date at 4:30PM time via conference call from the corporate offices of Creative Mailbox Designs, LLC, located at 12801 Commodity Place.


We do hereby consent to the adoption of the following as if it was adopted at a regularly called meeting of the board of members of the Company. In accordance with the State law and the bylaws of this Company, by unanimous consent, the board of members decided that:

Accept the resignation of Jeff Croskey as Vice President / General Manager of Creative Mailbox Designs, LLC.

Assign the title Vice President to Tom Hughes along with the associated duties, responsibilities, and authority of this position

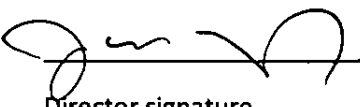
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TALLAHASSEE, FLORIDA

The members of the Company are authorized to perform the acts to carry out this corporate resolution.


Director signature

Larry Morgan
Printed Name

12/15/2015
Date


Director signature

Jamie Harden
Printed Name

12/15/2015
Date


Director signature

Kelly Crandall
Printed Name

12/15/2015
Date