## LD500097753

(Re	questor's Name)			
(Ad	dress)	<del></del>		
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
OCT -3 2012				
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SECRETARY OF STATE
TALL AHASSEF FLORIDA

## **COVER LETTER**

TO: Registration Division of C					
SUBJECT:	_ A Point of You	ı, Interior Design LLC			
	Name of Lim	ited Liability Company	<del></del> _		
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.			
Please return all corres	pondence concerning this matter	r to the following:			
		Holly Kriviski			
		Name of Person			
	A Po	int of You Interior Design			
		Firm/Company			
		343 Corey			
		Address			
	St.	Pete Beach, Fl. 33706			
		City/State and Zip Code			
	E-mail address: (	olly@apointofyou.com to be used for future annual report notificat	ion)		
For further information	n concerning this matter, please		,		
_	Holly Kriviski	<sub>at (</sub> 727 <sub>)</sub> 638-2381 o	r 360-5539 office		
Name	of Person Area Code & Daytime Telephone Number		elephone Number		
Enclosed is a check for	r 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

A Point of You Interior Design, LLC					
( <u>Name of the Limited</u> (A	Liability Company as it now appears A Florida Limited Liability Company)	on our records.)			
The Articles of Organization for this Limited L	iability Company were filed on	4/30/11	and assigned		
10=0000	• •				
Florida document number10500097					
This amendment is submitted to amend the foll	lowing:				
A. If amending name, enter the new name of	of the limited liability company here	į.			
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Compan	y," the designation "	LLC" or the abbreviation		
Enter new principal offices address, if applic	cable:				
(Principal office address MUST BE A STREI	ET ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>				
		•.	41		
B. If amending the registered agent and registered agent and/or the new registered of		ar records, <u>enter</u>	tne name of the new		
	<del>_</del>				
Name of New Registered Agent:	HOLLY KRIVISKI		Pos 🗕		
New Registered Office Address:	343 COREY AVENUE		2 00		
New Registered Office Address.		er Florida street ad	dress		
	ST.PETERSBURG	. Florida	33 <b>Z</b> 06		
	City		Zip Code		
New Registered Agent's Signature, if changing	Registered Agent:		Zip Code O		
I hereby accept the appointment as register	ed agent and agree to act in this co		H. W.		
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 reg					
being filed to merely reflect a change in the company has been notified in writing of this	4				
	s change.  If Changing Registered Age	1 YWWh	/ tegistered Agent		
	i Changing Registered Age	M DIPMINIC OF NEW I	CENTELL I I ECIL		

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Address** Type of Action Title Name HOLLY KRIVISKI - OWNER MGRM 1300 8TH, STREET NORTH ✓ Add Remove ST PETERSBURG, FL. 33701 JEFF JANSON-OFFICE M MGR ✓ Add 522 PINELLAS BAYWAY S. TIERRA VERDE FL 33715 ∇ Remove MGR CAROL GALWAY - DESIG **✓** Add 1107 BOCA CIEGA ISLE T PETE BEACH EL 33706 Add Remove ∏Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) HOLLY KRIVISKI IS SOLE OWNER OF A POINT OF YOU. JEFF JANSON & CAROL CALWAY ARE ABOVE. SEPTEMBER 27 Dated\_ Signature of a member or authorized representative of a member

Page 2 of 2

HOLLY KRIVISKI
Typed or printed name of signee

Filing Fee: \$25.00