

L06000006284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

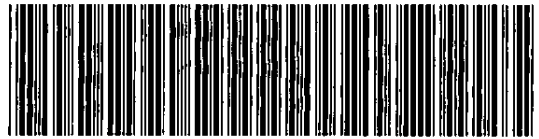
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Johanna Livingston
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correct name.

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04/21/09--01026--024 **30.00

LHC NCA Amendment

L06-6284

Left
out "Planning"
name

FILED
09 APR 21 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. CAUSSEAU

APR 22 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Livingston Virtual Marketing and Events, 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:

Johanna M. Livingston

(Name of Person)

JML Creative Group, LLC

(Firm/Company)

1730 E Hwy 50, Suite 78

(Address)

Clermont, FL 34711

(City/State and Zip Code)

For further information concerning this matter, please call:

Johanna M. Livingston

(Name of Person)

at (352) 217-9820

(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**

Livingston Virtual Marketing and Events Planning, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
09 APR 21 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on January 19, 2006 and assigned
Florida document number L06000006284

This amendment is submitted to amend the following:

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

JML (Johanna M. Livingston) Creative Group, LLC

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

Enter new principal offices address, if applicable:

1730 E Hwy 50, Suite 78

(Principal office address MUST BE A STREET ADDRESS)

Clermont, FL 34711

Enter new mailing address, if applicable:

1730 E Hwy 50, Suite 78

(Mailing address MAY BE A POST OFFICE BOX)

Clermont, FL 34711

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:

No Change

New Registered Office Address:

1730 E Hwy 50, Suite 78

(Enter Florida street address)

Clermont

(City)

Florida 34711

(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 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.

JML (Johanna M. Livingston)
(If Changing Registered Agent, Signature of New Registered Agent)

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
	NO CHANGE		<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FEIN: 26-4237145

FILED
09 APR 21 PM 12:01
TALLAHASSEE, FL 32304

Dated April 13, 2009



Signature of a member or authorized representative of a member

Johanna M. Livingston

Typed or printed name of signee