

## DLOODOINAT

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status

Special Instructions to Filing Officer:

L. SELLERS

FEB 1 5 2011

**EXAMINER** 

Office Use Only



100193604931

02/14/11--01007--010 \*\*30.00

VENET SAMESTALL WITH THE SECOND SECON

FEB IL PH L



## **COVER LETTER**

Division of Co			
SUBJECT:	Lovers	s Artistry LLC	
SUBJECT:		ited Liability Company	<del></del>
The enclosed Articles o	f Amendment and fee(s) are sul	pmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Annie Jensen	
		Name of Person	
		Design Artistry LLC	
		Firm/Company	
	1	314 Maldonado Drive	
		Address	<del></del> -
	Pen	sacola Beach, FL 32561	
		City/State and Zip Code	
	E-mail address: (	eybcool@yahoo.com to be used for future annual report notifica	tion)
For further information	concerning this matter, please	eall:	
	nnie Jensen	at ()	25-9008
Name	of Person	Area Code & Daytime T	elephone 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)
	LING ADDRESS: tration Section	STREET/COURIER Registration Section	R ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

The man was part of

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Lovers Arti	istry LLC					
(Name of the Limited L (A F	<b>iability Compar</b> Torida Limited L	y as it now apper lability Company	ars on our records.)				
The Articles of Organization for this Limited Liab Florida document numberL060000116		were filed on	February 2, 200	6a	nd assig	ned	
This amendment is submitted to amend the follow	ving:						
A. If amending name, enter the new name of t	he limited liabi	lity company h	ere:				
•	Design Artis	stry LLC					
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ed Liability Com	pany," the designation	"LLC" o	r the ab	breviation	
Enter new principal offices address, if applicable:		Design Artis	stry LLC				
(Principal office address MUST BE A STREET	ADDRESS)	1314 Maldonado Drive					
•		Pensacola I	Beach, FL 32561				
Enter new mailing address, if applicable:		Design Artis	itry LLC	_			
(Mailing address MAY BE A POST OFFICE B	<u>0X)</u>	1314 Maldonado Drive					
		Pensacola Beach, FL 32561					
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, enter	the na	me of	the new	
Name of New Registered Agent:				22 CM 7 CM 7 CM			
New Registered Office Address:	1314 Maldor		nter Florida street aa	T TO	71 (B)	Gardenine Gardenine	
	_		•	111	D.	) 3553	
	Pens	sacola Beach	, Florida _		256.1	्राज्यात्त्व इ.सम्बद्ध	
New Registered Agent's Signature, if changing Re	gistered Agent:	City			C#∯e ∪1. 	Salar .	

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.

If Changing Registered Agent, Signature of New Registered Agent

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

	<u>Name</u>	Address	Type of Action
			Add Remove
	•		Add Remove
			Add Remove
			Add Remove
			Add Remove
<u>.</u>			Add Remove
	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	
). If amen —			_
D. If amen			<del>-</del> 
D. If amen	February 102	011	  

Page 2 of 2

Filing Fee: \$25.00