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(Re	equestor's Name)	
(Ac	ldress)	
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COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Agtistic Design Services
(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:
ARTISTIC Design Services, LLC (Firm/Company)
5341 FAWN Woods Of (Address) Sanford Fl 32771
(City/State and Zip Code) (City/State and Zip Code)
107 324-06759 3
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

_	ARtistic Design Services, LLC (Present Name)	_	
	(A Florida Limited Liability Company)		
FIRST:	The Articles of Organization were filed on MARCH 20, 200 Land assigned document number _ LOGODD 28898,		
SECOND:	Removal of manasing member, Steve		
•	Dahl of 21952 SW 126th Ave, MIAMINET FI 33170.	ر 30 ا	
	HASSETAF EE	ŻI NNF	רובט
	OF STA FLORI	<u>P</u> ુ:	
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Dated	June 1, 2006.		
	Signature of a member or authorized representative of a member		
	Typed or printed name of signee		

Filing Fee: \$25.00