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2010 JUL - J MII: 24
SECRETARY OF STATE

C. LEWIS

JUL 2 2010

EXAMINER

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: NR Graphic Design 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:
Nilson Ruiz Name of Person
NR Graphic Design LLC
2924 Collins Ave. #207
Miami Beach FL. 33140  City/State and Zip Code  Nilson Ruiz Q Yahoo - Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nilson Ruiz  at (305) 331-5857  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Filing Fee & Solution

#### 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

FILED

		2010 JUL - J AM 11: 2
(Name of the Limited Liability Comp (A Florida Limited	Entertainment any as it now appears on our record Liability Company)	LL GETARY OF STAT E) TALLAHASSEE, FLORI
The Articles of Organization for this Limited Liability Compan Florida document number	ulacla	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
NR Graphic Design LL	С	
The new name must be distinguishable and end with the words "Lim"L.L.C."	nited Liability Company," the designat	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable:	2924 Collins	Ave. #207
(Principal office address MUST BE A STREET ADDRESS)	2924 Collins / Miami Beach	, FL. 33140
	<del> </del>	
F. (4		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
Mulling maress may be a rost office box		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	et address
	, Floric	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and ag the provisions of all statutes relative to the proper and com- accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	plete performance of my duties, a provided for in Chapter 608, F.S	nd I am familiar with and . Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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

	<u>Name</u>		<u>Address</u>		Type of Action
_					Add Remove
_					Add Remove
_		·			Add Remove
_					Add Remove
<del>_</del>					Add Remove
					Add Remove
— meno	ling any other informatio	on, enter chan			
	ling any other information	on, enter chan			
	ling any other information			al sheets, if necessary.)	

Filing Fee: \$25.00