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SECRETARY OF STATE TALL AHASSEE, FLORIDA

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COVER LETTER

SUBJECT: Davis Insurance Agéncy Limited Liability Ompany
(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:
Charles Wm. Davis Tr (Name of Person)
Davis Insurance Agency Limited Liability Company
3959 S. Nova Rd, Suite 35
Port Orange, Fl 32127 (City/State and Zip Code) Es S
FE 8 T
(City/State and Zip Code) ALECT OCT ARET AS SECRET 19
Charles War. Davis Jr = 386, 451-2810
Charles War. Davis Tr at (386, 451-2810 Fig. 1) (Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

Davis Insurance Agency Limited Liability Company
(A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on 10-11-2006 and assigned document number 1.06000994496.
SECOND:	This amendment is submitted to amend the following: Name change to:
	Davis Creations Limited Liability Company
	Effective dute: 11-01-2007 PM B
	TO AMI
	RICE 06
Dated 10	0-16-2007
	Signature of a member or authorized representative of a member
	Charles Wm. Davis Tr Typed or printed name of signee

Filing Fee: \$25.00

IFECTIVE DATE