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SECRETARY OF STATE

M. THOMAS

JAN - 4 2010

EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJE	CT:	ESIGN, LLC ability Company	
	osed Articles of Amendment and fee(s) are submitted	-	
	EARL R. BI	RAUDY Name of Person  FIS BY DESIGN, LIC Firm/Company	
	1254 ROYAL CA		
		State and Zip Code  D BELL SOUTH, NET  ged for future annual report notification)	
For furth	ner information concerning this matter, please call:		SEE TO
	Name of Person	at (407) 305-1512 Area Code & Daytime Telepho	one Number 8
Enclosed	is a check for the following amount:		
<b>\$</b> 25.0	00 Filing Fee \$\bigs\tag{\$30.00 Filing Fee & \bigs\tag{\tag{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:	STREET/COURIER ADI	DRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

/NTERIOR CONCER (Name of the Limited Lia	PISBY DESIGN, L	.LC	
(Name of the Limited Lia (A Flo	orida Limited Liability Company	)	
The Articles of Organization for this Limited Liabi	lity Company were filed on	OCT 16, 2000	and assigned
Florida document number <u>L0600010075</u>	<u>50</u> .	•	
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company h	ere:	
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Com	pany," the designation	'LLC" or the abbreviation
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET A	(DDRESS)		
			<del> </del>
			弱 昌 丁
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u> </u>		SEE FIL
			F. 27 0:
B. If amending the registered agent and/or		•	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter	the rame of the new
Name of New Registered Agent:	EARL R.	BRAWDY	
New Registered Office Address:			
	1	Enter Florida street ac	ldress
<u>-</u>		, Florida _	
	City		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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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

MGR = Manager

MGRM = Managing Member **Address Type of Action Title** <u>Name</u> SUSAN I, BRAWDY MGR 1254 ROYAL OAK DRIVE ☐ Add WINTER SPRINGS FL 32708 Remove 1254 ROYAL OAK DRIVE WINTER SPRINGS FL 32708 MGR EARL R. BRAWDY **⊠** Add Remove \_\_\_ Add . Remove Add Remove Remove တ D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 1. BRAWDY Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00