## 107000044577

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

	gistration Se ision of Cor			
CHD IECT.		Canvas LLC		
SUBJECT:		Name of Lim	ited Liability Company	<del></del>
The enclosed	d Anticles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Lewis C. Bedell		
		<del></del>	Name of Person	
		Luxe Prints LLC		
			Firm/Company	
		329 Central Ave		
			Address	
		Sarasota, FL 34236-4915		
		-	City/State and Zip Code	<del></del>
		lew@luxeprints.com		
		E-mail address: (	to be used for future annual report notif	ication)
For further in	nformation c	oncerning this matter, please c	all:	
Lewis Bede	11		941 484-4500 ex	
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is	a check for ti	ne following amount:		
■ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & 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: 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

Destination Canvas LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records nited Liability Company)	5.)
The Articles of Organization for this Limited Liability Com	pany were filed on 4/26/2007	and assigned
Florida document number 1.07000044577		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Luxe Prints LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC"	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>(S)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		SSS RU
Francis Harris BETT OF OTTICE BOX		m,
B. If amending the registered agent and/or registere	ed office address on our records	enter the name of the new
registered agent and/or the new registered office address		<u> </u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	s
	. Flo	orida
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = .	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Change
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Effective date, if other than the date of filing: (optional	n Es	7
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filin <b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this dat	ie will gorbe li	s <b>tod</b> as th
document's effective date on the Department of State's records.		64
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m.) The 90th day after the record is filed.	. on the ear	lier of:
Dated		
Signature of a Hember or authorized representative of a member		
Lewis C. Bedell		
Typed or printed name of signee		

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Filing Fee: \$25.00