## L0700055887

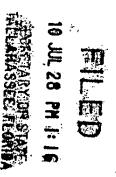
| (Re                     | questor's Name)   |           |
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| (Ad                     | dress)            |           |
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| PICK-UP                 | WAIT              | MAIL      |
| (Bu                     | siness Entity Nam | ne)       |
| (Do                     | cument Number)    |           |
| Certified Copies        | _ Certificates    | of Status |
| Special Instructions to | Filing Officer:   |           |
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Office Use Only



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07/28/10--01007--001 \*\*25.00



D. BRUCE

JUL 29 2010

**EXAMINER** 

## **COVER LETTER**

| SUBJECT:Nam                                                                  | By Design LLC ne of Limited Liability Company                                     |                                                                      |  |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------|--|
| Nam                                                                          |                                                                                   |                                                                      |  |
|                                                                              |                                                                                   |                                                                      |  |
| The enclosed Articles of Amendment and fee(                                  | (s) are submitted for filing.                                                     |                                                                      |  |
| Please return all correspondence concerning the                              | his matter to the following:                                                      | ,                                                                    |  |
|                                                                              | Kamal Dides                                                                       |                                                                      |  |
|                                                                              | Name of Person                                                                    |                                                                      |  |
|                                                                              | By Design LLC                                                                     |                                                                      |  |
|                                                                              | Firm/Company                                                                      |                                                                      |  |
|                                                                              | 6423 Indigo Bunting Place                                                         |                                                                      |  |
| - 1                                                                          | Address                                                                           |                                                                      |  |
|                                                                              | Lakewood Ranch, FL 34202                                                          | <b>3</b> 9 <b>3</b>                                                  |  |
| <del></del>                                                                  | City/State and Zip Code                                                           |                                                                      |  |
| E-mail                                                                       | kdides@bydesignusa.com<br>address: (to be used for future annual report notifica  | ation) & 2                                                           |  |
| For further information concerning this matter                               | r, please call:                                                                   |                                                                      |  |
| K 1511                                                                       |                                                                                   |                                                                      |  |
| Kamal Dides  Name of Person                                                  | at ( 941 ) 9  Area Code & Daytime                                                 | 0284848 Telephone Number                                             |  |
|                                                                              | ·                                                                                 |                                                                      |  |
| Enclosed is a check for the following amount:                                |                                                                                   |                                                                      |  |
| \$25.00 Filing Fee \$30.00 Filing F Certificate of                           |                                                                                   | Certificate of Status & Certified Copy (additional copy is enclosed) |  |
| MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 | STREET/COURIE<br>Registration Section<br>Division of Corporat<br>Clifton Building |                                                                      |  |

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**

|                                                                                                                                           | By Desi                              | gn LLC                                       |                           |           |             |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------|---------------------------|-----------|-------------|--|--|
| ( <u>Name of the Limited</u><br>(A                                                                                                        | Liability Compa<br>Florida Limited I | ny as it now appears o<br>Liability Company) | on our records.)          |           |             |  |  |
| The Articles of Organization for this Limited Liability Company were filed onMay 25, 2007 and assigne Florida document numberL07000055887 |                                      |                                              |                           |           |             |  |  |
| This amendment is submitted to amend the follo                                                                                            | owing:                               |                                              |                           |           |             |  |  |
| A. If amending name, enter the new name of                                                                                                | the limited liab                     | ility company here:                          |                           |           |             |  |  |
| The new name must be distinguishable and end wit "L.L.C."                                                                                 | h the words "Lim                     | ited Liability Company                       | ," the designation "L     | LC bothe  | breviation  |  |  |
| Enter new principal offices address, if applicable:                                                                                       |                                      | 6423 Indigo Bu                               | nting Place               |           |             |  |  |
| (Principal office address MUST BE A STREE                                                                                                 | T ADDRESS)                           | Lakewood Rand                                | ch, FL 34202              | <u> </u>  | <b>3</b>    |  |  |
|                                                                                                                                           |                                      |                                              |                           | 3,9       |             |  |  |
| Enter new mailing address, if applicable:                                                                                                 |                                      | 6423 Indigo Bui                              |                           |           |             |  |  |
| (Mailing address MAY BE A POST OFFICE BOX)                                                                                                |                                      | Lakewood Ranch, FL 34202                     |                           |           |             |  |  |
| B. If amending the registered agent and/or the new registered of                                                                          |                                      | <u>e</u> :                                   | records, <u>enter t</u> l | he name ( | of the new  |  |  |
| Name of New Registered Agent:                                                                                                             |                                      |                                              |                           |           | <del></del> |  |  |
| New Registered Office Address: 6423 Indigo Bunting Place  Enter Florida street address                                                    |                                      |                                              |                           |           |             |  |  |
|                                                                                                                                           |                                      |                                              | rioriaa sireet aaai       |           |             |  |  |
|                                                                                                                                           | Lake                                 | ewood Ranch                                  | , Florida                 | 3420      |             |  |  |
| New Registered Agent's Signature if changing G                                                                                            | المسمئمين                            | City                                         |                           | Zip Code  | 3           |  |  |
| TEW RECISIESEN ACENTS STUNSTILE. IT CHANGING N                                                                                            | PURIEFFII AUFIII'                    |                                              |                           |           |             |  |  |

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, Unereby 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 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:

 $MGR \doteq \hat{M}anager$ MGRM = Managing Member Title Name **Address Type of Action** Yazen Dides MGRM 6423 Indigo Bunting Place ☐ Add Bradenton, FL 34202 ✓ Remove MGRM Kamal Dides 6423 Indigo Bunting Place ✓ Add ☐ Remove Lakewood Ranch, FL 34202 Remove Add Remove □Add Remove Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 26th Dated \_\_\_\_ Signature of a member or authorized representative of a member

Page 2 of 2

Kamal Dides
Typed or printed name of signee

Filing Fee: \$25.00