10800024658

(Requestor's Name)				
(Address)				
(Address)	 -			
(City/State/Zip/Phone #)				
PICK-UP WAIT MAI	L			
(Business Entity Name)				
(Document Number)				
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Amend				

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G. MCLECD
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EXAMINER

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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Christia	an Italiano Design, L	LC_	
	(Name of Lim	nited Liability Company)	
•			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Anthony Italiano		
	- randing	(Name of Person)	
	Christian Italiano Design	, LLC	
		(Firm/Company)	
	2832 South MacDill Aver	nue	
		(Address)	
	Tampa, FL 33629		
		(City/State and Zip Code)	
For further information of	concerning this matter, please of	all:	
Anthony Italiano		at (813 ₎ 839-2076	
(Name	of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the	ne following amount:		
☑ \$25.00 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

Christian Italiano Design, LLC			
· (Name of the Limited Liabi (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)		
The Articles of Organization for this Limited Liability	y Company were filed on March 10, 2008	and ass	igned
Florida document number L08000024658	·		
This amendment is submitted to amend the following	;;		
A. If amending name, enter the new name of the l	imited liability company here:		
The new name must be distinguishable and end with the v.L.L.C."	words "Limited Liability Company," the designation "LL	.C" or the a	bbreviation
Enter new principal offices address, if applicable:		9	<u> </u>
(Principal office address MUST BE A STREET AD	DRESS)	=	<u> </u>
			<u> </u>
		223	
Enter new mailing address, if applicable:		<u> </u>	
Mailing address MAY BE A POST OFFICE BOX)		- 5	
	4		
B. If amending the registered agent and/or reg	gistered office address on our records, <u>enter the</u> ddress here:	e name o	f the new
Name of New Registered Agent:		·····	
New Registered Office Address:			
	(Enter Florida street address)		
	, Florida	-	
	(City)	(Zip Code	e)

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.

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

MGR = Manager MGRM = Managing Member

Title .	<u>Name</u>	Address	Type of Action
MGRM.	Anthony Italiano	2832 South MacDill Avenue Tampa, FL 33629	_ Add
MGR	Christian Kamaris	2832 South MacDill Avenue Tampa, FL 33629	Add Remove
			Add Remove
7			Add Remove
	·····		Add Remove
			Add Remove
D. If amendia	ng any other information, enter cl	hange(s) here: (Attach additional sheets, if necessary.)	_
			_
Dated July 7,	20	008	
Dated odly 11	,	ember or authorized representative of a member	
-	Anthony Italiano	yped or printed name of signee	.

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Filing Fee: \$25.00