L08000030448

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EXAMINER

COVER LETTER

Division of Co.	rporations	
SUBJECT:	BRION DESIGN LLC Name of Limited Liability Company	
The enclosed Articles of	Amendment and fee(s) are submitted for filing.	
Please return all correspondent	ondence concerning this matter to the following:	
	Alejandro Garen	
	Brian Design LLC Firm/Company	
	5900 Courino del Sol #302	
	has later 5, 33433	,
	Cancabella a condition Cancabella a condition E-mail address: (to be used for juture annual report notification) Concerning this matter, please call:	
For further information of	concerning this matter, please call:	ĵ.
	Bellovi at 954, 257 - 1616 Area Code & Daytime Telephone Number	
Name o	f Person Area Code & Daytime Telephone Number	
Enclosed is a check for t	he following amount:	
□ \$25.00 Filing Fee	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certificate of Status (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

TO:

Registration Section

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

Baion De	ESIGN	LL(- -					
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)								
The Articles of Organization for this Limited Liability Con Florida document number <u>L080003044</u>	npany were fi	led on	03.	25	.200	<u> 8</u> and	l assign	ed
This amendment is submitted to amend the following:								
A. If amending name, enter the new name of the limited	d liability co	mpany he	re:					
The new name must be distinguishable and end with the words	SIGN	LL	C					
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liab	ility Comp	any," t	he desi	gnation	"LLC" or	the abbr	eviation
Enter new principal offices address, if applicable:						100 CO	2012	
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>					<u> </u>	70	<u> </u>
					_		$\overline{\omega}$	\$ \$1a.
Enter new mailing address, if applicable:							3	Speciment of the second of the
(Mailing address MAY BE A POST OFFICE BOX)						Đ.	68 0	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		dress on	our re	ecords	s, <u>ente</u>	r the nam	ne of th	ne new
Name of New Registered Agent:								 -
New Registered Office Address:		0						
	Enter Florida street address							
	, Florida							
	City					Zip C	оае	

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

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

MGR = Mai MGRM = M	nager Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
		77	Add Remove
		(2) (2) (3) (1) (2) (3)	Add
D. If amend	ing any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary	
			
<u> </u>	07 7-		
Dated MAR		uu .	
•		r or authorized representative of a member	
		CO GAREP(or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00