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SECRETIARY OF STATE TALLAHASSEE, FLORIDA

DEC 24 AH ID: 51

M. THOMAS

DEC 2 9 2008

EXAMINER

COVER LETTER

TO: - Registration Division of C		•.				
SUBJECT: Veckie	o Photography, LLC (Name of Lim	ited Liability Company)	 		•	
	of Amendment and fee(s) are sub	•	·			
	Dena Dahlquist	oo aa tonoming.				
		(Name of Person)				
	Veckio Photography, LL(
						
	14820 Rue De Bayonne	Suite 306				
		(Address)				
	Clearwater, FL 33762					
		(City/State and Zip Code)		7 <u>7</u> 2	90	
For further information	n concerning this matter, please c	all:		SSVAWY SOUTH	08 DEC 24 AH 19: 5:	* 1 1110
Dena Dahlquist		at (727) 492-3711			122	
(Nam	e of Person)	(Area Code & Daytime T	elephone Number)	Y OF STATE	1 19 : 53	
Enclosed is a check for	the following amount:					
2 \$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)			
Regi Divis	LING ADDRESS: stration Section sion of Corporations Box 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building		,		

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Vecklo Photography, LLC							
(Name of the Limited (A	Liability Company Florida Limited Lia	as it now appears on our pility Company)	records.)				
The Articles of Organization for this Limited Liability Company were filed on August 28, 2008							
Florida document number L08000082592	·			~			
This amendment is submitted to amend the following	owing:	·					
A. If amending name, enter the new name of	the limited liabili	ly company here:					
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited	Liability Company," the	designation "LLC"	' or the abbreviation			
Enter new principal offices address, if applic	able:						
(Principal office address MUST BE A STREE	TADDRESS)						
				<u> </u>			
	•	··· · · · · · · · · · · · · · · · · ·		2			
Enter new mailing address, if applicable:			į	22 五			
•							
(Mailing address MAY BE A POST OFFICE)							
	•		<u> </u>	STATE 5			
Th. Te. 31 3		••	*	co			
B. If amending the registered agent and/or registered agent and/or the new registered of		e address on our reco	ords, <u>enter the </u>	name of the new			
	Dana Dahlasida						
Name of New Registered Agent:	Dena Dahlquist						
New Registered Office Address:	14820 Rue De Bayonne Suite 306						
· · · · · · · · · · · · · · · · · · ·		(Enter Flor	rida street addres	s)			
	Clearwater , Florida 33762						
		(City)		(Zip Code)			
New Registered Agent's Signature, if changing I	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title Name **Address** Type of Action MGR Dena Dahlquist 14820 Rue De Bavonne Suite 306 ■ Add Clearwater, FL 33762 Remove ☐ Add Remove 🗂 Add Remove Remove ₫λdd Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) DECEMBER 21 Dated Signature of a member or authorized representative of a member KISITH VINSKI Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00