

LD8000104255

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(City/State/Zip/Phone #)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 MAY 17 PM 3:37

T. HAMPTON  
MAY 18 2010  
EXAMINER

TO: Registration Section  
Division of Corporations

SUBJECT: Ashira Photography, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kalyssa M. Wilson  
Name of Person

Ashira Photography  
Firm/Company

2644 Bancroft Blvd  
Address

Orlando, FL 32833  
City/State and Zip Code

Kalyssa@ashiraphotography.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kalyssa M. Wilson at (407) 242-5433  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the 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

TO  
ARTICLES OF ORGANIZATION  
OF

Ashira Photography, LLC  
(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 Company were filed on NOV 7, 2008 and assigned Florida document number LO8000104255.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with 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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED  
STATE  
DIVISION OF CORPORATION  
10 MAY 17 PM 3:37

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Kalysa M. Wilson

New Registered Office Address:

2649 Bancroft Blvd

Enter Florida street address

Orlando

City

Florida

32833

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 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.

Kalysa M. Wilson

If Changing Registered Agent, Signature of New Registered Agent

or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Katlysa M. Wilson	2649 Bancroft Blvd Orlando, FL 32833	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Anterio L. Wilson	2649 Bancroft Blvd Orlando, FL 32833	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10 MAY 17 PM 3:37  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Dated May 13, 2010

Anterio Wilson  
Signature of a member or authorized representative of a member  
Anterio Wilson  
Typed or printed name of signee