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PART ANA SEE, FLORIDA

S. HAWKES
FEB 1 1 2010
EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Creative Concepts by Johis, "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:		
Jhohanna Mennie		
Name of Person		
Firm/Company		
14113 CITIZUS Crest CIRUL Address		
Tampa Fl 33625 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Thohanna Mennie at (813) 5265674.  Name of Person Area Code & Daytime Telephone Number		
Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee Certificate of Status & Certificate 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

Creative Concept	s by Johis, "LLC"	
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number LO900014984.		
This amendment is submitted to amend the following:	FL 000 12: 46	
A. If amending name, enter the new name of the limited lia	bility company here:	
Creative Concepts ba	Thohanna Gailego, "L.L.C."	
The new name must be distinguishable and end with the words "Lin" "L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	14113 CITEUS Crist circle	
(Principal office address MUST BE A STREET ADDRESS)	14113 CITEUS Crist airch Tamps Pl 33626	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
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:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City 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.

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 Type of Action Name Address Uhohanna Gallego 11GR 14113 CITRUS arest circu ☐ Add Remove 33626 Jampo Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) February Dated Signature of a member or authorized representative of a member ongna Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00