(Requestor's Name)

09 0000 699

(Address)

(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



04/15/19--01026--021 **25.00

FILED 19 APR 15 /H 8: 15 ALLANAUSEL (LOODA

•

APR 2 7 2019 S. YOUNG

Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations

CSK CREATIVE LLC

SUBJECT: _

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:

Craig Kotilinek

Name of Person

CSK CREATIVE LLC

Firm/Company

2000 Galen Ave

Address

Winter Park, FL 32798

City/State and Zip Code

craig.kotilinek@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Craig Kotilinek 407 7181112 at (_____) 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CSK CREATVELLC

(<u>Name of the Limited Liability Company as it now appears on our records.</u>) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on	7/21/2009 and assigned
Florida document number 1.09000069908	

This amendment is submitted to amend the following:

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

CSK CREATIVE LLC

nation "LLC" or the abbreviation."LLC." $\geq \sum_{i=1}^{n} \Phi_{i}$
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
- -

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

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	ddress
	City	, Florida 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 605, 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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Keely Kotilinek	2000 Galen Ave Winter Park, FL 32789	🖻 Add
			Remove
			Change
			Add
			Remove
			Change
			Add
			🖾 Remove
			Change
			🛛 Add
			Remove
			Change
			🗆 Add
			Remove
			Change
			🖸 Add
			Remove
			Change

<u> </u>			··			
					· · · ·	
<del>_</del>					,,	_ <b>.</b>
;		···				
				· · · ·		
			<u> </u>		,	
					•	
				<u> </u>		
	r than the date of	-4/16/19	ASAP		ptional)	

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	4-12-19
	Signature of a member or authorized representative of a member
	Craig Kotilinek

Typed or printed name of signee

Filing Fee: \$25.00