## 11000000 8547

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## **COVER LETTER**

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Registration Section

TO:

Division of Co	rporations		
Staging Ma	atters, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Tara E. Molloy		
	<del></del>	Name of Person	
	Name of Limited Liability Company  of Amendment and fee(s) are submitted for filing.  pondence concerning this matter to the following:  Tara E. Molloy  Name of Person  Staging Matters, LLC  Firm/Company  PO Box 9282  Address  Fort Myers, FL 33902  City/Ntate and Zip Code  StagingFortMyers@gmail.com  E-mail address: (to be used for future annual report notification)  of concerning this matter, please call:  For Person  at (		
		Firm/Company	
	PO Box 9282		
		Address	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  Section orporations Tallahassec
	Fort Myers, FL 33902		
		City/State and Zip Code	<del></del>
	StagingFortMyers@gmail.c	com	
	E-mail address: (	to be used for future annual report not	tification)
For further information c	oncerning this matter, please c	all:	
Tara E. Molloy		239 822-2955	
Name of Person		Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Addres Registration 5			etion
Division of C		Division of Co	
P.O. Box 632		The Centre of	Tallahassee
Tallahassee, I	rL 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Staging Matters, LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on our reco Liability Company)	<u>)rds.</u> )		
The Articles of Organization for this Limited Florida document number L10000008547	Liability Company	were filed on 1/25/2010	:	and assign	ed
This amendment is submitted to amend the fo-	llowing:				
A. If amending name, enter the new name	of the limited liab	oility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LI	LC" or the abbrevia	tion "L.L.C	<del></del>
Enter new principal offices address, if appli	icable:	Staging Matters, LLC			
Principal office address MUST BE A STREET ADDRESS)		3812 Hidden Acres Circle S.		_	
		North Fort Myers, FL 33903	3		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Staging Matters, LLC		2020 J	
		PO Box 9282		2	
		Fort Myers, FL 33902		-2	
B. If amending the registered agent and/or agent and/or the new registered office addro	registered office : ess here:	address on our records, <u>ente</u>	er the name of t		gistered
	<del></del>		•-;	00	
Name of New Registered Agent:	Tara E. Molloy		<u>_</u>		
New Registered Office Address:	3812 Hidden A	cres Circle S.			
		Enter Florida sirvet addi	ress		
	North Fort Myd	ers, I	Florida 33903		
	<u> </u>	City		o 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, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		<del></del>	□ Remove
			□ Change
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ffective date, if other than the da	1/1/2020		(antional)	
an effective date is listed, the date must be	specific and cannot be pri	or to date of tiling or mor	e than 90 days after filing.) Pu	arsuant to 605.0207
ote: If the date inserted in this block ocument's effective date on the Depart	does not meet the application of State's record	icable statutory filing.	requirements, this date wil	ll not be listed as
record specifies a delayed effective da	ite, but not an effective	time, at 12:01 a.m. on	the earlier of: (b) The 9	0th day after the
l is filed.				
December 26	2019			
atcu			•	
	nature of a member or aut			

Filing Fee: \$25.00