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SECRETARY OF STATES
TALLAHASSES, FLORIDA

SEP 2 7 2016 S. YOUNG

## **COVER LETTER**

Division of Corporations
SUBJECT: ARTISAN FINISH CARPENTRY, LLC  Name of Limited Liability Company
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:
SHAUN NAVE  Name of Person
ARTISAN FINISH CARPENTRY, LLC Firm/Company
9772 W TERRY ST
9772 W TERRY ST Address
BONITA SPRINGS FL 34135 City/State and Zip Code
City/State and Zip Code  SHAUNNAVF P GMATL COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SHAUN NAVE at (239) 989-3037  Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
Enclosed is a check for the following amount:  \$25.00 Filing Fee \$\text{Certificate of Status}\$\$ \$\text{Certified Copy}\$\$ (additional copy is enclosed)  \$60.00 Filing Fee, 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

	IRPENTRY, LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)		
The Articles of Organization for this Limited Liability Company of Florida document number <u>L 10000099641</u> .  This amendment is submitted to amend the following:	were filed on 9-23-10 and assigned		
A. If amending name, enter the new name of the limited liabil	lity company here.		
ARTISAN DESIGN BUILDING 9 The new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name of the name			
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	865 95TH AVE N		
(Principal office address MUST BE A STREET ADDRESS)	865 95TH AVE N = 700 NAPLES, FL 34108 13		
	No state of the st		
	977) W TERRY ST = 1		
Enter new mailing address, if applicable:	BONITA SPRINGS, FL 34135		
(Mailing address MAY BE A POST OFFICE BOX)	DONT IN SIKTIONS LE 34330000		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here			
Name of New Registered Agent:			
New Registered Office Address:			
Now 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 provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is		

If Changing Registered Agent, Signature of New Registered Agent

## or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	SHAUN NAVE	9772 W TERRY ST	
		BONITA SPRINGS, FL 3	4135 Remove
			Change
AMBR	STACY UGHI	11812 QUAIL VILLAGE	
		NAPLES, FL 34119	□ Remove
			Change
			Add
			□ Remove
			Change
			□ Add
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(If an ef <b>Note:</b>	tive date, if other than the date of filing: \( \frac{9-15-16}{0-15-6} \) (optional)  fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed the nent's effective date on the Department of State's records.	6.0207 (3)(b) ed as the
(b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies 90th day after the record is filed.	er of:
Dated	September 15th, 2016	
	September 15 <sup>th</sup> , 2016  Shaun Naue MKM  Signature of a member or authorized representative of a member  SHAUN NAVE  Typed or printed name of signee	
	SHAUN NAVE Typed or printed name of signee	

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Filing Fee: \$25.00