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D. BRUCE
MAR 2 5 2011
EXAMINER

## **COVER LETTER**

TO: Registration Division of C				
SUBJECT:	Savvylicio	ous Designs, LLC		
	Name of Lim	ited Liability Company		_
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corres	pondence concerning this matte	r to the following:		
		Ana Anselmo		<u> </u>
		Name of Person		
	Sa	vvylicious Designs, LLC		
		Firm/Company		_
		16391 SW 29th Street		_
		Address		1 m s <sup>2</sup>
		Miramar, FL 33027	- Silvis	
		City/State and Zip Code		HAR 24 AHETARY AHASSE
	E-mail address: (	SavvyliciousDesigns.c	com t notification)	ASS A
For further information	concerning this matter, please	call:		F ST
A	Ana Anselmo	at (_954_)	646-9614	10A
Name	of Person	Area Code & D	aytime Telephone Numl	ber
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 enc	Certifi closed) Certifi	Filing Fee, icate of Status & ied Copy onal 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**

Sav ( <u>Name of the Limited L</u> (A F	vylicious [ iability Compa lorida Limited [	Designs, LLC ny as it now appears on Liability Company)	our records.)	<del></del>	
The Articles of Organization for this Limited Liab Florida document number L100001298	•	were filed on	12/21/2010	and assig	ned
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of the	he limited liab	oility company here:			
The new name must be distinguishable and end with t "L.L.C."	the words "Limi	ited Liability Company,"	the designation "	'LLC" or the abl	oreviation
Enter new principal offices address, if applicab	16391 SW 29th Street				
(Principal office address MUST BE A STREET ADDRESS)		Miramar, FL 330	27		
Enton nove mailing address if annihilation		16201 CM 20th 6	N-0-t	MAR 24 REJARY AHASSEI	=
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		16391 SW 29th S Miramar, FL 330		7 3	m
to the state of th	<u>/A)</u>	- Iviiramar, 1 E 300.		STATE	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered of e address her	fice address on our i <u>e</u> :	records, <u>enter</u>	the name of	the new
Name of New Registered Agent:	Ana Anselmo				
New Registered Office Address:	16391 SW 29th Street				
	Enter Florida street address				
Mirar		mar, FL 33027	, Florida	33027	
N B to 14 9 5		City		Zip Code	
New Registered Agent's Signature, if changing Reg	ustered 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 donfirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGMR	Stephanie Nizio	13770 Green Cove Place Davie, Florida 33325	Add Remove
			Add Remove
MGMR	Robert Anselmo	16391 SW 29th Street Miramar, FL 33027	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change(s		TARY OF ST
Dated		- A	<b>90</b>
Dated	Signatura of a membra of	fundamental ratherized representative of a member	
-	А	na Anselmo printed name of signee	

Page 2 of 2

Filing Fee: \$25.00