11000001578

(Red	questor's Name)	<u>-</u>
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K. SALY SEP 25 2017

· COVER LETTER

	tration Section on of Corporations	
SUBJECT:	NAME BADGES, LLC	
SUBJECT: _	Name of Limited Liability Company	
The onel-rod A	while of American (16.77)	
	Articles of Amendment and fee(s) are submitted for filing.	
i icase return ar	to correspondence concerning this matter to the following.	
	ANDREW SIEGERMAN	
	Name of Person	
	SIEGERMAN & COMPANY	
	Firm/Company	
	1440 CORAL RIDGE DR NUM 117	
	Address	
	CORAL SPRINGS, FL 33071	
	City/State and Zip Code ANDY@SIEGERMAN.COM	
	F-mail address: (to be used for future annual report notification)	
For further info	ormation concerning this matter, please call:	
ANDREW SIL		
	Name of Person at () Name of Person Area Code Daytime Telephone Number	 -
	heck for the following amount:	
≅ \$25.00 Fili	ng Fee	of Status & Opy
+	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

2017 SEP 22 AM 11: 22
TALLAHASSEE, FLORIDA

NAME BADGES, LLC

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

The Articles of Organization for this Limited Liability (•	and assigned
florida document number L11000001578	·	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the lim</u>	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD.	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		enter the name of the r
		enter the name of the
registered agent and/or the new registered office add	<u>dress here</u> :	enter the name of the
registered agent and/or the new registered office add		enter the name of the
registered agent and/or the new registered office add	<u>dress here</u> :	enter the name of the r
	dress here:	

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 = N $AMBR = A$	Aanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	ANDREA BANZIN	12240 SW 53RD STREET	■ Add
		COOPER CITY, FL 33330	☐ Remove
			□ Change
			□ Remove
			D Change
			Add 22 Remove
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fective date, if other than in effective date is listed, the date of the inserted in this ocument's effective date on the	must be specific and can s block does not meet	not be prior to date of f the applicable statut	iling or more than 90 days	optional) after filing.) Pursuant to 605.020' this date will not be listed as
record specifies a dela The 90th day after the	yed effective date record is filed.	e, but not an effe	ective time, at 12:0	01 a.m. on the earlier o
ned 4/20/	2017	·		
	1.	,		
X			escutative of a member	

Page 3 of 3

Filing Fee: \$25.00