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(Requestor's Name)
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COVER LETTER

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SUBJECT:					
l'Amendment and fee(s) are sub	mitted for filing.				
oundence concerning this matter	to the following:				
Dylan Williams					
	Name of Person				
The Faded Firefly LLC					
	Firm/Company				
1132 Hoffner Ave					
	Address				
Orlando El 32809					
	City/State and Zip Code				
		ication)			
	407 592-9245				
of Person	Area Code Daytime	Telephone Number			
the following amount:					
■ \$30.00 Filing Fee & Certificate of Status	© \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Section	Street Address: Registration Sec				
	Name of Lin Name of Lin If Amendment and fee(s) are subsondence concerning this matter Dylan Williams The Faded Firefly LLC 1132 Hoffner Ave Orlando Fl 32809 Dylan@cclipsetinyhomes.c E-mail address: (concerning this matter, please concerning this matter) of Person the following amount:	Amendment and fee(s) are submitted for filing. Dondence concerning this matter to the following: Dylan Williams Name of Person The Faded Firefly LLC Firm/Company 1132 Hoffner Ave Address Orlando Fl 32809 City/State and Zip Code Dylan@eclipsetinyhomes.com E-mail address: (to be used for future annual report notificencerning this matter, please call: at (

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Registration Section

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The raded theny LLC.		
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.11000018785	were filed on 2/14/11	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
Eclipse Tiny Homes LLC		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		7021
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name	of thernew registe
		∼
Name of New Registered Agent:	- 	2
New Registered Office Address:	;	3
	Enter Florida street address	
	Circ	Zin Code

New Registered Agent's Signature, if changing Registered Agent:

The Corled Clearly 14 C.

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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 acor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
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