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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

CUDIECT.		DESIGN LLC						
SUBJECT:Name of Limited Liability Company								
The enclose	d Articles of A	Amendment and fee(s) are subn	nitted for filing.					
Please return	n all correspor	ndence concerning this matter to	o the following:					
		Julian Loftis						
		BRIO WEB DESIGN LLC	Name of Person	· · · · · · · · · · · · · · · · · · ·				
		6610 Bon Bay Dт.	Firm/Company					
		Milton, FL 32583	Address					
		julian@briowebdesign.com	City/State and Zip Code					
For further i	information co	nmail address: (to encerning this matter, please ca	o be used for future annual rep	on nouncation)				
Julian Lofti	s Name of	Person	850 572-5 at () Area Code	Daytime Telephone Number				
Enclosed is	a check for th	e following amount:						
\$25,00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

BRIO WEB DESIGN LLC		
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our record Florida Limited Liability Company)	<u>'ds.</u>)
The Articles of Organization for this Limited Liab	bility Company were filed on 04/11/2011	and assigned
Florida document number 1.11000042702		
This amendment is submitted to amend the follow	ving:	
A. If amending name, <u>enter the new name of t</u>	he limited liability company here:	
he new name must be distinguishable and contain the work	ds "Limited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO	<u> </u>	
3. If amending the registered agent and/or registered agent and/or the new registered office	r registered office address on our record	ds, enter the magne of the n
egistered agent and/or the new registered office	Ce audress nere:	6
N CN D '		
Name of New Registered Agent:		्र
New Registered Office Address:		
	Enter Florida street addr	ess -
	, F	Florida
	Cuy	гар Соне

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>	Name	<u>Address</u>	Type of Action
MGR	John Loftis		□ Add
		6610 Bon Bay Dr. Milton, FL	
		32583	■ Веточе
			☐ Change
AMBR	Karen Loftis	6610 Bon Bay Dr. Milton, FL 32583	∃ Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			
		 	□ Remove
			Change
			Add
			□ Remove
		 	☐ Change
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			Change

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Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the Do	t be specific and cannot be prior to ock does not meet the applicat		after filing.) Pursuant to 605.0207 (3)(
the record specifies a delayed The 90th day after the reco		an effective time, at 12:0	1 a.m. on the earlier of:
Dated July 25th	2019		
	11.	Lts.	
		7 17.4	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00