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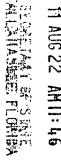
AUG 23 2011

EXAMINER



000211101270

08/22/11--01020--023 **30.00



COVER LETTER

Division o	of Corporations			
SUBJECT:	SILK ROAD GALLERY	AND DESIGN STUDIO,	LLC	
SOLD BOTTO	Name of Limit	ted Liability Company		
	: •		:.	
The enclosed Artic	les of Amendment and fee(s) are sub	mitted for filing.		
Please return all co	rrespondence concerning this matter	to the following:		
		Barbara Walker		
		Name of Person	, , , , , , , , , , , , , , , , , , , 	
	WALKER - M	IICHELE DESIGN STUDIO, I	LC	
		Firm/Company		
	401 SE 25 AVENUE, SUITE 601			
		Address		
	FORT LAU	JDERDALE, FLORIDA 3330°	1	
	City/State and Zip Code			
	walke	erdesigns@hotmail.com		
	E-mail address: (t	o be used for future annual report notificat	ion)	
For further informa	tion concerning this matter, please co	all:		
В	ARBARA WALKER	at (_954)52	4-5669	
N	lame of Person	Area Code & Daytime To	elephone Number	
Enclosed is a check	for the following amount:			
\$25.00 Filing Fo	ee	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

Registration Section

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

SILK ROAD GALLERY AND DESIGN STUDIO, LLC.

(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability C Florida document number <u>L11000067440</u>	Company were filed onJU	JNE 7, 2011 and assigned
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:	
WALKER - MICH	IELE DESIGN STUDIO, LI	_C
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	SAME	Tane
(Principal office address MUST BE A STREET ADD)	RESS)	
		5 5
	112 1111 11 11 11 11 11 11 11 11 11 11 1	22
Enter new mailing address, if applicable:	SAME	
(Mailing address MAY BE A POST OFFICE BOX)		
		5 5
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent: SAM	<u>lress here</u> :	records, enter the name of the new
N. B. 14 1005 All '		
New Registered Office Address:	Enter F	lorida street address
		Florida

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 608, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

<u>Title</u>	Name	Address	Type of Action
	SAME		Add Remove
	SAME		Add Remove
			D Domasia
			Add Remove
			Add Remove
**************************************			☐ D amazua
		nter change(s) here: (Attach additional shee	
_			
Dated	16 August	_,2011	· · · · · · · · · · · · · · · · · · ·
	Signature o	Parbara Walkur of a member or authorized representative of a me	mber
		Barbara Walker Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00