## L11 0000 73858

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRET REPORTS INTERPREDICTIONS

JUL 1 9 2016 S, YOUNG

## **COVER LETTER**

TO:	Registration Se Division of Cor		y . •	
SUBJE	•	reations, LLC	`	
		Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	_	
Please 1	return all correspo	indence concerning this matter	to the following:	
		Vincent Talenti		
			Name of Person	
		Wayside Creations, LLC		
			Firm/Company	
		738 Sunset Drive		13 17 18
			Address	
		Tarpon Springs, FL 34689		
		waysidecreations@gmail.co	City/State and Zip Code	15 Jul 10 PH 2: 55
		E-mail address: (	to be used for future annual report no	otification)
For furt	ther information c	oncerning this matter, please c	all:	
Vincen	t Talenti		727 460-3630	
	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclose	ed is a check for th	ne following amount:		
\$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MAIL	ING ADDRESS:	STREET/COU	RIER ADDRESS:

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wayside Creations, LLC		
(Name of the Limited Liability ( (A Florida Li	Company as it now appears on o imited Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Con Florida document number $\frac{L11000073858}{L11000073858}$	mpany were filed on	2011 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designate	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>	<b>3</b> 作的
		Comment of the control of the contro
Enter new mailing address, if applicable:		יין בי פוני היי
(Mailing address MAY BE A POST OFFICE BOX)		- 12 Co
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	reet address
	City	, Florida Zip Code

company has been notified in writing of this change.

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

If Changing Registered Agent, Signature of New Registered Agent

## If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Vincent Talenti	738 Sunset Drive	□ Add
<del></del>		Tarpon Springs, FL 34689	And
			Remove
			■ Change
			☐ Add
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			© Change
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	ust be specific and cannot be prior to date of filing oblock does not meet the applicable statutory f	(optional) or more than 90 days after filing.) Pursuant to 605.02 filing requirements, this date will not be listed a
e record specifies a delay The 90th day after the re		re time, at 12:01 a.m. on the earlier
July 12	2016	
ated	· · · · · · · · · · · · · · · · · · ·	
Val	Signature of a member or authorized representa	

Page 3 of 3

Filing Fee: \$25.00