## 11000127683

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SECRETARY OF CORPORATIONS
OF THE SECRETARY OF THE SECRETA

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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Registration Section Division of Corporations

P.O. Box 6327 Tailahassee, FL 32314

SUBJECT:	III	umitap, LLC	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	And	<u>-                                    </u>	
		Name of Person	
	Eve		
	Andrew Walker  Name of Person  Event Decor Direct Firm/Company  98 SE 7th Street  Address  Deerfield Beach, FL 3  City/State and Zip Code  accounting@eventdecordirect.com  E-mail address: (to be used for future annual concerning this matter, please call:  app at (800) Area Code  Ferson  Area Code  \$30.00 Filing Fee & Certificate of Status  Certified Copy	Firm/Company	
	98	SE 7th Street	
	·	Andrew Walker Name of Person  Event Decor Direct Firm/Company  98 SE 7th Street Address  Deerfield Beach, FL 33441 City/State and Zip Code  nting@eventdecordirect.com iil address: (to be used for future annual report notification) er, please call:  at (800 ) 914 - 3538	
	D	eerfield Beach, FL 33441	
		City/State and Zip Code	
	accounting@e E-mail address: (	ventdecordirect.com to be used for future annual report notic	fication)
For further information o		·	,
		at (_800)914 - 353	38
The enclosed Articles of Amendment and fee(s) are  Please return all correspondence concerning this ma  A  A  Counting(  E-mail address  Barbara Koolick Knapp  Name of Person  Enclosed is a check for the following amount:  \$25.00 Filing Fee \$30.00 Filing Fee &	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	<del>-</del>	☐ \$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/COURI	ER ADDRESS:

Registration Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Illumitap, LLC.		<u> </u>	
(Name of the Limited Liability Company as it no (A Florida Limited Liability C	ompany)		
he Articles of Organization for this Limited Liability Company were file	ed on November 9, 2011	and assig	gned
lorida document number <u>L11000127683</u>			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited liability com	pany here:		
he new name must be distinguishable and contain the words "Limited Liability Compa	ny," the designation "LLC" or the abbrev	iation "L.L.	G"
		18	SI.
nter new principal offices address, if applicable:			<u> </u>
rincipal office address MUST BE A STREET ADDRESS)	<del></del>	<del></del>	무류
<del></del> -			22
		PH	Ster
nter new mailing address, if applicable:			<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		<del>-</del>	25 m 26
. If amending the registered agent and/or registered office add	ress on our records, enter the	name of	the
gistered agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:		<del></del>	
1	Enter Florida street address		
	, Florida		
City		in Code	

## 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	Address	Type of Action
AMBR	James Lester	98 SE 7th Street, Deerfield Bch., FL 33441	🗹 Add
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If an effective Note: If the	date, if other than the ve date is listed, the date must he date inserted in this blo's effective date on the De	be specific and ock does not m	cannot be prior to neet the applica	o date of filing or ble statutory fili	more than 90 days a	otional) fler filing.) Pursua this date will not	nt to 605 : be list	5.020° cd as
	d specifies a delayed th day after the reco		ate, but not	an effective	time, at 12:0:	1 a.m. on the	earli	er o
Dated	May 23		2018					
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		Segmature of a m	oember or author	ized rentesentativ	e of a member			
		Signature of a m	nember or author	azea representativ	e of a member			

Page 3 of 3

Filing Fee: \$25.00