11000138571

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EXAMINER



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COVER LETTER

TO: Registration : Division of Co			
SUBJECT:	Art of Th	e Wedding, LLC	
		ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	pondence concerning this matter	r to the following:	
		Lana D. Pelham	
		Name of Person	
		Art of The Wedding	
		Firm/Company	
	1298 (Minnesota Avenue, Suite F	
	***************************************	Address	
	· · · · · · · · · · · · · · · · · · ·	Vinter Park, FL 32789	
		City/State and Zip Code	
		Lana@fdn.com	
		to be used for future annual report notificat	ion)
For further information	concerning this matter, please of	call:	
L	.ana Pelham	at (321) 69	95-5440
Name of Person		at (321) 69 Area Code & Daytime To	elephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: 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**

Art of T	he Wedding				
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appe ted Liability Company	ars on our records.)			
The Articles of Organization for this Limited Liability Company were filed on			and assigned		
Florida document number L11000138571					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	liability company he	ere:			
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Com	pany," the designation	"LLC" or the a	bbreviation	
Enter new principal offices address, if applicable:			<u> </u>		
(Principal office address MUST BE A STREET ADDRES:	<u></u>		三語 73	······································	
•					
			-8 } }	al organism Marketine E	
Enter new mailing address, if applicable:				FF	
(Mailing address MAY BE A POST OFFICE BOX)		······································	C 40 53		
	 		REAL OF	···	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		our records, enter	the name o	f the new	
Name of New Registered Agent:		<u> </u>			
New Registered Office Address:	F	nter Florida street aa	Idraec		
	12		(4) C33		
	City	, Florida _	Zip Code		
New Registered Agent's Signature, if changing Registered Ag	ent:		-		

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.

If Changing Registered Agent, Signature of New Registered Agent

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 MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Arthur H. Faulkner	1298 Minnesota Avenue, Suite F Winter Park, FL 32789	Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
*eggmentels			
 Dated	February 6, _∕ , 20	212	
	Signature of a member	luam r or authorized representative of a member	,
	Lana D. Pe		
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00