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COVER LETTER

SUBJECT: FY	esh screen	Prints, LL	<u>C.</u>
Sobject:		ed Liability Company	 -
The enclosed Articles of	of Amendment and fee(s) are subm	nitted for filing.	
Please return all corresp	oondence concerning this matter to	o the following:	
	Jerri	J ROUVIGU	lZ
	Freshs	Creen Print	S, LLC.
	240 TO	allegrand f	tve
	Jacksor	Wille, FL 32 City/State and Zip Code	2202
	Gita E-mail address: (10	be used for future annual report noti	<u>lad · C.OM</u>
For further information	concerning this matter, please ca	11:	
<u>Cita</u>	Fayazi of Person	at $\frac{904}{\text{Area Code}}$ $\frac{472}{\text{Daytim}}$	e Telephone 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)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

TO ARTICLES OF ORGANIZATION OF

Fresh Sc	reen Prints, l	LLC.
(Name of the Limited I	Jability Company as it now appears on of Torida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liabi	lity Company were filed on <u>O</u>	$\frac{23}{2012}$ and assigned
This amendment is submitted to amend the followi	ng:	
A. If amending name, enter the new name of the FYEST TOYEGO. The new name must be distinguishable and contain the words. Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	s "Limited Liability Company," the designate:	ation "L.L.C." Solution "L.L.C." Control of the abbreviation "L.L.C." Control of the abbreviation "L.L.C."
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office		records, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	reet address
-	C:L.	, Florida
	City	гір 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

or removed from our records:

MGR = Manager AMBR = Authorized Member •

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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TO THE TO SEE
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E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(8) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated $\frac{7/18}{2017}$.
Λ Λ
Signature of a member or authorized representative of a member
V T Plan
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00