

LI2000057705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

02/21/13--01022--007 **30.00

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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C. LEWIS
FEB 22 2013
EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 FEB 21 AM 1:46

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: BLESSED PRINTS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TASHA KEITT

Name of Person

Firm/Company

2666 HIAWATHA AVE

Address

SANFORD FLORIDA 32773

City/State and Zip Code

BLESSEDPRINTS1@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TASHA KEITT

Name of Person

407 321-8814

at (_____) Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

<input type="checkbox"/> \$25.00 Filing Fee	<input checked="" type="checkbox"/> \$30.00 Filing Fee & Certificate of Status	<input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<input type="checkbox"/> \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

2013 FEB 21 AM 1:46

BLESSED PRINTS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/30/2012 and assigned Florida document number L12000057705.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

A PURPOSED JOURNEY SERVICES LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2666 HIAWATHA AVE

SANFORD FLORIDA 32773

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME AS ABOVE

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

City _____ Zip 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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2013 FEB 21 AM 1:46

Dated _____

Tasha Keitt / Lantravia Jones

Signature of a member or authorized representative of a member

Tasha Keitt / Lantravia Jones

Typed or printed name of signee

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Filing Fee: \$25.00