L120000009811

(Requestor's Name)				
dress)				
dress)				
y/State/Zip/Phone	e #)			
WAIT	MAIL			
siness Entity Nan	ne)			
(Document Number)				
_ Certificates	of Status			
Special Instructions to Filing Officer:				
	dress) dress) y/State/Zip/Phone WAIT siness Entity Nan cument Number) Certificates			

Office Use Only



400250163914

08/12/13--01031--003 **25.00

2013 AUG 12 PH 1:52

AUG 13 2013 D. ERUCE

COVER LETTER

TO:

Registration Section Division of Corporations

Designer Dressings, 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:

Kara Williamson

Name of Person

Siavage Law Group, LLC

1360 Peachtree St., Suite 1050

Atlanta, GA 30318

City/State and Zip Code

kwilliamson@siavagelaw.com

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

For further information concerning this matter, please call:

Kara Williamson

Name of Person

at (404) 351-5280

Area Code & Daytime 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:

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

Designer Dressings, LLC					
(Name of the Limited	Liability Compar	ny as <mark>it now appears on our rec</mark> Jability Company)	ords.)		
(,	t i torida Enimed E	naomicy company)			
The Articles of Organization for this Limited L	and assigned				
Florida document number L12000069861					
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	f the limited liab	ility company here:			
Tru Table, LLC					
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ited Liability Company," the desig	gnation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:		11450 SE Dixie Highway, Suite 207			
(Principal office address MUST BE A STREET ADDRESS)		Hobe Sound, Florida 33455			
Enter new mailing address, if applicable:		11450 SE Dixie Highw	ay, Suite 207		
(Mailing address MAY BE A POST OFFICE BOX)		Hobe Sound, Florida 3	3455		
			>5 > 7		
			SE O		
B. If amending the registered agent and	or registered of	fice address on our records	, enter the same dithe new		
registered agent and/or the new registered o	mce address ner	<u>e</u> :			
N 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Jody Kalmt	ach	85 = (
Name of New Registered Agent:			5 S		
New Registered Office Address:					
		Enter Florida s	treet address		
	Hobe Soun		orida <u>33455</u>		
		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.

f Changing Registered Agent, Signature of New Registered Agen

Page 1 or3

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

Title	<u>Name</u>	Address	Type of Action
MGR	Jody Kalmbach	11450 SE Dixie Highway, Suite 207	Z ✓ Add
		Hobe Sound, Florida 33455	Remove
MGR	Scot Elmore	2000 AUBURN DRIVE SUITE 330	[] Add
		CLEVELAND, OH 44122	Remove
			Add
			Remove
···		Property of the state of the st	Add
			Remove 2 PH
		ELORI)	Add Remove
	·		— —
			Add

*D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The Company shall be manager-managed. No member has any right or power to participate in the management of the Company except as expressly required by the Company's operating agreement or except as expressly required by the Florida Limited Liability Company Act.

Accordingly, no member, acting solely in the capacity of a member, is an agent of the Company nor may member in such capacity bind or execute any instrument on behalf of the Company.

Dated August

2013

gnature of a member or authorized representative of a member

Jody Kalmbach, member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2018 AUG 12 PH 1: 52