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SECRETARY OF STATE TALLANASSEL FLORID

MAR 01 2016 S. YOUNG

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Co	rporations		•
1	uca L.L.C		
SUBJECT:		ted Liability Company	
	Name of Linii	icu Liabinty Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing	
		_	
Please return all correspondence	ondence concerning this matter t	o the following:	
	Julian	" Moss	
	Juction	Name of Person	
	Maticas	Firm/Company	540
	1	Firm/Company	一
	2040 NE	: 208 St	
		Address	
	Miari	FL 33179	્રા ં
		City/State and Zip Code	H 5: 55
	Juliana	n @ maticus design	s. Com
	E-mail address: (to	n O maticus design o be used for future annual report redi	ication)
For further information of	concerning this matter, please ca	111.	
	oneoning and matter, produce ou	•••	
Julia	nu Moss	at (305) 613-77	999
	of Person		Telephone Number
		·	•
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	\$55.00 Filing Fee &	□ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
			(additional top) is the lowery
	TNG 4 DDDDG-		
	ING ADDRESS: ration Section	STREET/COURING Registration Section	
	on of Corporations	Division of Corpora	
	ox 6327	Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Jula L.C.C		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on May 25, 2012	and assigned
Florida document number <u>L120000 70734</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	, Fo
Maticas Design L.	C	5 5
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abbrev	iation EL.C.
Enter new principal offices address, if applicable:	2040 NE 708 ST	199 SECTION
(Principal office address MUST BE A STREET ADDRESS)	Micui FL 33179	2 Table 1
		<u> </u>
·		in F
Enter new mailing address, if applicable:	2040 NE 208 ST	
(Mailing address MAY BE A POST OFFICE BOX)	Miami Fl 33179	
B. If amending the registered agent and/or registered off		name of the new
registered agent and/or the new registered office address here	•	
Name of New Registered Agent:		
New Registered Office Address:	Paris Placific shoot address	
	Enter Florida street address	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	Cuy	rap coue
new Weristelen Wrent 2 Diringthief in englished Weristelen Wrent!		

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, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records:</u>

MGR = M $AMBR = A$	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			☐ Change
		- -	□ Remove >
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	•
ffective date, if other than the date of filing:	
e record specifies a delayed effective date, but not an effective time, at 12:01 The 90th day after the record is filed.	1 a.m. on the earlier
Signature of a member or authorized representative of a member	
Superior de la constante de la	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00