

L12000104506

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : JELEN ACCOUNTING SERVICES, INC
Account Number : 120120000052
Phone : (305) 591-9180
Fax Number : (305) 591-9167

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: jelenaccountingservices@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VM PLANNING AND DESIGNS, LLC

Certificate of Status	0
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TALLAHASSEE, FLORIDA

FILED
13 FEB 27 AM 8:42
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B. BOSTICK
FEB 28 2013
EXAMINER

H130000459793

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VM PLANNING AND DESIGNS, 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 08/14/2012 and assigned
Florida document number L12000104506.

This amendment is submitted to amend the following:

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

ID DESIGN FOR ALL, 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

City

Florida

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

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MGR = Manager
MGRM = Managing Member

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

Dated _____



Signature of a member or authorized representative of a member

VIVIANA MONARI

Typed or printed name of signee

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