L12,000135452

(Re	equestor's Name)	
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COVER LETTER

	istration Sect ision of Gorpo			•
	LuAnn's Ler	s:Warner-Prokos Photography	: LLC L12000135452	
SUBJECT:		Name of Limite	ed Liability Company	
The enclosed	Articles of A	mendment and fee(s) are subm	nitted for filing.	
Please return	all correspond	dence concerning this matter to	o the following:	
		LuAnn Warner-Prokos		
			Name of Person	
		Warner-Prokos Photograph	у	
			Firm/Company	
		10375 Rio Lindo		
		<u> </u>	Address	
		Delray Beach, Florida, 334	46	
			City/State and Zip Code	
		Info@wpportraits.net		
		E-mail address: (to	be used for future annual report notifi	cation)
For further is	nformation cor	ncerning this matter, please cal	11:	
LuAnn War	ner-Prokos		561 271-7954	
			at ()	Telephone Number
	Name of	Person	Area Code Dayume	Telephone Number
Enclosed is a	check for the	following amount:		
□ \$25.00 H	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 Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LuAnn's Lens: Warner-Prokos Photography, LLC L12000135452 (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 _ and assigned Florida document number _____L12000135452 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Warner-Prokos Photography, LLC L12000135452 The new name must be distinguishable and contain 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 _, Florida Cuv

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			☐ Change
			□ Add
			□Remove
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

(f amei	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	3/18/2021
f an effe Note:	the date, if other than the date of filing: (optional) ctive 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 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as not's effective date on the Department of State's records.
e 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 d.
	3-17 2021
Dated ₋	
	Signature of a member or authorized representative of a member
	LuAnn Watner-Prokos
	Typed or printed name of signer