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COVER LETTER

TO:

Registration Section

Division of Corporations Design Phase Architecture, LLC SUBJECT: 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: Laura Ella Wright Name of Person Design Phase Architecture, LLC Firm/Company 1090 Bimini Lane Address Singer Island, FL 33404 City/State and Zip Code laura@designphasearchitecture.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Laura Ella Wright Name of Person Daytime Telephone Number Enclosed is a check for the 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 & Certified Copy (additional copy is enclosed) (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Design Phase Architecture, LLC						
(Name of the Limit	ed Liability Compa	ny as it now appears Liability Company)	on our records.)			
	(A Fioriga Limited I	Liability Company)				
The Articles of Organization for this Limited Li	ability Company	were filed on	12/12/2012	and assigned		
Florida document numberL12000155694						
This amendment is submitted to amend the following	owing:	1				
A. If amending name, enter the new name of	the limited liab	ility company her	<u>e</u> :			
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the des	signation "LLC" or the	abbreviation "L.L.C."		
Enter new principal offices address, if application	able:					
(Principal office address MUST BE A STREE	T ADDRESS)	1090 Bimini Lan	e			
		Singer Island, FL 33404				
Enter new mailing address, if applicable:				- 		
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	1090 Bimini Lane				
		Singer Island, FL 33404				
B. If amending the registered agent and/ registered agent and/or the new registered of			our records, <u>ente</u>	the name of the new		
Name of New Registered Agent:						
New Registered Office Address:	1090 Bimini La	<u> </u>		Au		
		Enter Florid	la street address	93 kg		
	Singer Island		, Florida _ ³	, Florida 33404:		
		City		Zip Code:		
New Registered Agent's Signature, if changing I	legistered Agent;			7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
I hereby accept the appointment as registere provisions of all statutes relative to the proper accept the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	er and complete stered agent as p registered office	performance of n provided for in Cl	ny duties, and I am napter 605, F.S. O	familiar with and , if this document is		

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
			
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Typed or printed name of signee

Filing Fee: \$25.00