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SECRETARY OF STATE

MAR 05 2013 D. BRUCE

## **COVER LETTER**

TO: Registration Section

**Division of Corporations** 

SUBJECT: THE AMERICAN ARTIST 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:

DIANA BAIROS

Name of Person

WILSON'S TAX SERVICE, INC.

Firm/Company

7855-204 ARGYLE FOREST BLVD

Address

JACKSONVILLE, FL 32244

City/State and Zip Code

DIANA@WTSJAX.COM

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

For further information concerning this matter, please call:

**DIANA BAIROS** 

904 317-4784

Name of Person

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

Company as it now appears on imited Liability Company)	our_records.)
ompany were filed on JANUA	ARY 10, 2013 and assigned
ted liability company here:	
ds "Limited Liability Company,"	the designation "LLC" or the abbreviation
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	RES O
	<b>&gt;</b>
	records, enter the name of the new
ress nere:	
Enter F	lorida street address
	. Florida
City	Zip Code
	ds "Limited Liability Company,"  PESS)  ered office address on our ress here:  Enter F

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

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 = Mana MGRM = Ma	iger naging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
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D. If amendin	g any other infor	mation, enter change(s) here:	(Attach additional sheets, if necessary.)	
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Dated MAR	CH 1	, 2013		<del></del>
		Drew Alexa	mder	
_		Signature of a member of authori	zed representative of a member	
[	REW R AL	EXANDER		
		Typed or printed	name of signee	<del></del>

Page 3 of 3

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