

L13000034177

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Amend

Office Use Only



200247018702

04/23/13--01010--020 **25.00

FILED
2013 APR 23 AM 8:12
STATE OF FLORIDA
TALLAHASSEE

J. SAULSBERRY
EXAMINER
APR 25 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Elizabeth Design, 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:

Destiny DeBerry
Name of Person
Elizabeth Design, LLC.
Firm/Company
P.O. Box 16705
Address
Fernandina Beach, FL 32035
City/State and Zip Code
destinyelizabethdeberry@yahoo.com
E-mail address: (to be used for future annual report notification)

FILED
2013 APR 23 AM 8:12
TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

Destiny DeBerry at (**904**) **624-0190**
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**

Elizabeth Design, 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 03/04/2013 and assigned Florida document number L13000034177.

This amendment is submitted to amend the following:

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

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)

FILED
2013 APR 23 AM 8:22
STATE OF FLORIDA
TALLAHASSEE

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 _____
City 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

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:

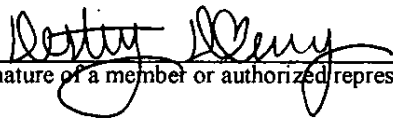
MGR = Manager
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------|----------------------------|--|
| MGR | Destiny DeBerry | 2641A South Fletcher | <input checked="" type="checkbox"/> Add |
| | | Fernandina Beach, FL 32034 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
| | | | <input checked="" type="checkbox"/> Add |
| | | | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |

FILED
 APR 23 8:12
 2011
 CLERK OF SUPERIOR COURT
 JUDICIAL CENTER
 1000 N. GUY WOOD BLVD
 PALM BEACH, FL 33480

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

Dated April 22, 2013.



Signature of a member or authorized representative of a member

Destiny DeBerry

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 APR 23 AM 8:22
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED