L13000046133

(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:	

Office Use Only



300278168313

10/19/15--01025--008 **25.00

2015 OCT 19 P 2: 53
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

OCT 22 2015

3 MASON

COVER LETTER

Registration Section

TO:

Spivision of Corporations		
SUBJECT: <u>Evergreen Holida</u> Name of Lim	nited Liability Company	
The enclosed Articles of Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Uma Kendr	Name of Person	
Evergreen	Holiday Lighting, LLC Firm/Company	
2807 E. J.	efferson St. Address	
Orlando, F	City/State and Zip Code Ceenholidaylighting net (to be used for future annual report hotification)	
E-mail address:	(to be used for future annual report hotification)	
For further information concerning this matter, please c	call:	
Uma Kendra Name of Person	at (541) 301-4660 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Evergreen Holiday Lia (Name of the Limited Liability Compar (A Florida Limited L	ly as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1300046123</u> .	were filed on 3/28/2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2707 E. Jefferson St.
(Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32803
Enter new mailing address, if applicable:	2707 E. Jefferson St.
Mailing address MAY BE A POST OFFICE BOX)	Orlando, FL 32803
B. If amending the registered agent and/or registered off 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 agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and fam familiar with and rovided for in Chapter 605, E.S. Or, If this document is

If Changing Registered Agent, Signature of 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 = Ai	Authorized Member	r			
<u>Title</u>	<u>Name</u>	Address	Type of Action		
			Add		
			☐ Remove		
			Change		
			□ p		
			Change		
		 			
		 	□ Remove		
			☐ Change		
			Add		
	•		□ Remove		
			Add		
			Remove		
,		· · · · · · · · · · · · · · · · · · ·	2015 OCT Change Remove Change Remove Change Remove R		
			2: Remove		
			П.О		

	•
	·
	····
	,
	
.	
ective date, if other than the date of filing:	optional) s after filing.) Pursuant to 605.0
e: If the date inserted in this block does not meet the applicable statutory filing requirement ument's effective date on the Department of State's records.	s, this date will not be listed
•	
record specifies a delayed effective date, but not an effective time, at 12: he 90th day after the record is filed.	01 a.m. on the earlier
. All dith and	
ed October 14th, 2015	.⊹s 2
	2015 0 SECR
Signature of a member or authorized representative of a member	
Dear Kanda	TARY O
Uma Kendra Typed or printed name of signee	The Total
	2: S STAT FILORI
	(전문 53

Filing Fee: \$25.00