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(C	ity/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL			
(E	Business Entity Name)				
(L	Ocument Number)				
Certified Copies	Certified Copies Certificates of Status				
Special Instructions to	o Filing Officer:	i			
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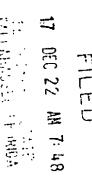


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CORPORATE ACCESS, _

When you need ACCESS to the world

INC.

236 East 6th Avenue, Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

	PICK	UP: 12/22 Glinda	
	CERTIFIED COPY		
ХХ	РНОТОСОРУ		
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,	PRETZ DESIGN LLC		
	(CORPORATE NAME AND DOCUM	NT#)	
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PECIA	L INSTRUCTIONS:		
		-	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRETZ DESIGN LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on 04/24/2014	and assigned
Florida document number L14000067016		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
PRESCHEL ARCHITECTURE STUDIO LLC		
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
• •		17
Principal office address MUST BE A STREET ADDRESS)		
		
		1L 22
inter new mailing address, if applicable:		in % in
Mailing address MAY BE A POST OFFICE BOX)		- I I
Mulling dudress MAT BE A FUST OFFICE BUAT		41. 7
. If amending the registered agent and/or registered egistered agent and/or the new registered office address he		nter the name of the r
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	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 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 =	AMBR = Authorized Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action			
			□ Add			
			☐ Remove			
			☐ Change			
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		-	□ Remove			
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). If amending	any other inf	ormation, ent	er change(s)	bere: (Attac	h additional she	eets, if necessar	y. <i>)</i>	
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Effective date (If an effective dat Note: If the da document's effe	e is listed, the dat te inserted in th	e must be specifie	and cannot be of meet the a	plicable statute			.) Pursuant to 605.0 will not be listed	
the record sp) The 90th d	ecifies a dela ay after the	nyed effective record is file	e date, but ed.	: not an effe	ctive time, at	; 12:01 a.m.	on the earlier	of:
Dated	DEC	- 19	20	17.				
	<u></u>	Signature o	s member or	nulhorized repos	entative of a men	ber		
		DENISE	01					

Page 3 of 3

Filing Fee: \$25.00