

L14 000108554

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(Address)

(Address)

(City/State/Zip/Phone #)

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The
Freeland
Eddie
Law Group, P.A.

Shelli Freeland Eddie, Esq.

August 7, 2014

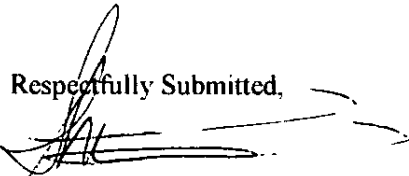
Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: ARTICLES OF AMENDMENT
FL DOCUMENT NUMBER: L14000108554
MLG EVENT DRAPING AND DESIGNS, LLC

To Whom It May Concern,

It is our understanding that the following Articles of Amendment was not processed due to the absence of a necessary signature. Please find enclosed a cover sheet, Articles of Amendment, with signature, and a check payable to The Florida Department of State in the amount of \$30.00 for the Articles of Amendment and Certificate of Status for this FL Limited Liability Company.

Should you have any further questions, please free to contact my office directly at (941) 366-6486.

Respectfully Submitted,


Shelli Freeland Eddie, Esq.
W/Encl.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MLG EVENT DRAPING AND DESIGNS 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:

Monique L. Geathers

Name of Person

Firm/Company

P.O. Box 191

Address

Parrish, FL 34219

City/State and Zip Code

mlgeventdraping@yahoo.com

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

For further information concerning this matter, please call:

Shelli Freeland Eddie, Esq. at **941 366-6486**

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

MLG EVENT DRAPING AND DESIGNS 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 July 9, 2014 and assigned
Florida document number L14000108554.

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)

5018 98th Avenue E.
Parrish, FL 34219

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:

5018 98th Avenue E.

Enter Florida street address

Parrish

City

, Florida 34219

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

Amending zip code of MGR

Monique L. Geathers

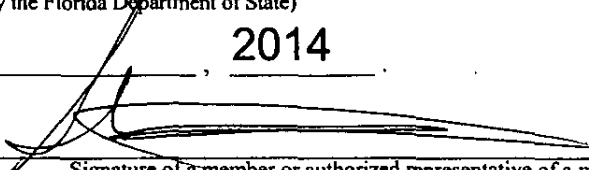
5018 98th Avenue E.

Parrish, FL 34219

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated July 11, 2014


Signature of a member or authorized representative of a member

Shelli Freeland Eddie, Esq.

Typed or printed name of signee