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FIM SEP 25 ID TO

B. BOSTICK SEP **3 0** 2014

January Carles

	COVER LETTER
TO: Registration Section Division of Corporations	Andy Art a CG, L.L.C.
SUBJECT: Andrew Phillips Name of Lim	ited Lightility Company
/	
The enclosed Articles of Amendment and fee(s) are sub	emitted for filing.
Please return all correspondence concerning this matter	to the following:
7670 PINE TY	th FL 33467 City/State and Lip Code (165916, 6, 6, 6)
For further information concerning this matter, please ca	all:
Andrew Phillips Name of Person	at (5/1) 685 -8710 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 & □ \$60.00 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

Andv's Art 4 C	G.L.L.C.			
Andy's Art 4 (Name of the Limited Liability (A Florida	y Company as it now appears on c Limited Liability Company)	our records.)		
The Articles of Organization for this Limited Liability Co. Florida document number 14000132123	ompany were filed on	25/2014	_ and as	signed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company here:			
The new name must be distinguishable and end with the words "Lim	nited Liability Company," the design	nation "LLC" or the abbr	eviation "	L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR.	ESS)	÷ .	9.44	
		ı.	2-	-
			d 3.8	ii
Enter new mailing address, if applicable:			r)	1-11-9
(Mailing address MAY BE A POST OFFICE BOX)			777	3 4 4
		•)	• .	
		,11	7-3	
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr	ered office address on our <u>ess here</u> :	records, enter the	name	of the new
Name of New Registered Agent:				
New Registered Office Address:	C. F.			
	Enter Florida str	reet address		
	. /	, Florida	m e :	
	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 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 = Ma AMBR = Au	nnager Ithorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Andrew Phillips	9670 PINE TRAIL CT LAKE WORTH, FL 334	Add Add
			□ Remove
<u>P</u>	Andrew Phillips	9670 PINE TRAIL CT LAKE WORTH, FL 33467	
			Remove
		·	□ Add
			Remove
			□ Add
			Remove
			□-Add
			□ Remove
			□ Add
			Remove

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ffective date, in the effective date in the date this document.	f other than the date of filing: nust be specific, cannot be prior to date of receient is filed by the Florida Department of State	(optional) cipt or filed date and cannot be more than 90 days after c)
he date this docum	f other than the date of filing: nust be specific, cannot be prior to date of rece nent is filed by the Florida Department of State	e) .
the date this docum	ent is filed by the Florida Department of State	e) .

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Filing Fee: \$25.00



September 11, 2014

ANDREW PHILLIPS 9670 PINE TRAIL COURT LAKE WORTH, FL 33467

SUBJECT: ANDY'S ART & CG, L.L.C.

Ref. Number: L14000132923

We have received your document for ANDY'S ART & CG, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 614A00019517