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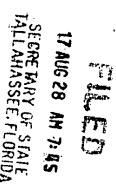
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COVER LETTER

TO:		ation Secti n of Corpo			
SUBJE		SIGN HO	USE STUDIO LLC		
	· · · ·		Name of Limit	ted Liability Company	***************************************
				-	
			JANINE GELLER		
			·	Name of Person	
			DESIGN HOUSE STUDIO	LLC	
			Name of Person DESIGN HOUSE STUDIO LLC Firm/Company 1770 NE 205TH TERRACE Address NORTH MIAMI, FL 33179 City/State and Zip Code janinegeller@gmail.com E-mail address: (to be used for future annual report notification) Incerning this matter, please call: Person Area Code Daytime Telephone Number e following amount:		
			1770 NE 205TH TERRAC	E	
				Address	
			NORTH MIAMI, FL 33179	9	
				City/State and Zip Code	
				-	t notification)
For furth	her infori	mation con	cerning this matter, please ca	11:	
JANINI	E GELLI	ER			0
		Name of P	erson		aytime Telephone Number
Enclosed	d is a che	eck for the	following amount:		
\$25.	.00 Filing	g 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

DESIGN HOUSE STUDIO, 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 FLORIDA and assigned Florida document number <u>L</u>14000137275 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

Florida

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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JONATHAN ABENHAIM	2515 NE 206 LANE	≅ Add
		NORTH MIAMI BEACH,	□ Remove
		FL 33180	Change
			
			□ Remove
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Typed or printed name of signee

Filing Fee: \$25.00