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Office Use Only

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	I2000000195			
	REFERENCE	:	770669 4300426			
	AUTHORIZATION	:	sox here non	\checkmark		
	COST LIMIT	:	\$ 55.00			
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ORDER DATE :	May 25, 2023					
ORDER TIME :	1:29 PM				202	
ORDER NO. :	770669-005				2023 HAY	7]
CUSTOMER NO:	4300426				Y 25	: 2.200 ; 2.200
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NAME: CRAIG DESIGN, LLC

EFFECTIVE DATE:

XX____ ARTICLES OF AMENDMENT ____ RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER'S INITIALS:

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		•	

COVER LETTER

TO: Registration Section Division of Corporations

Craig Design, LLC

SUBJECT: _

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:

Hugh Reilly

Name of Person

CBVR Telecom Design Group

Firm/Company		2023
6505 N. Himes Avenue	1	
Address	 	Y 25
Tampa. Florida 33614	о, ^с .	E
City/State and Zip Code		- Ei
HUGH.REILLY@CBVRTELECOM.COM		် မိ
E-mail address: (to be used for future annual report notification)	_	<u>u</u>

353-0026

For further information concerning this matter, please call:

Hugh Reilly

Name of Person

at (_____) Area Code

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)

813

S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Davtime Telephone Number

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Craig Design, LLC	
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{12/1}{12}$ Florida document number $\frac{114000189556}{12}$.	1/2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company her	e: - 22 - 23 - 23 - 23 - 23 - 23 - 23 - 23
The new name must be distinguishable and contain the words "Limited Liability Company," the de-	- 1 N
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	39
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 re- agent and/or the new registered office address here:	cords, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	

Enter Florida street address

_. Florida _

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.

City

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 = Authorized Member

Title	Name	Address	Type of Action
AMBR	Charlie Craig	6505 N Himes Ave Tampa, FL 33614	_ 🗆 Add
			_ 🗆 Remove
			_ = Change
AMBR	Hugh Reilly	6505 N Himes Ave Tampa, FL 33614	_ 🗆 Add
AMBR	Patrick Valent	6505 N Himes Ave Tampa, FL 33614	
			Remove
			_ = Change
		i	_ 🗆 Add
			_ 🗆 Remove
			_ 🗆 Change
			_ 🗆 Add
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E. Effective date, if other than the date of filing: _________(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 25.	2023	\mathcal{A}
		/
	Signature of a member or authorized representative of a memb	
Hugh Reilly		
+	Typed or printed name of signee	