## 115000000000365

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Dr	cument Number)	
(CC	coment nameer,	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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R. WHATE

## **COVER LETTER**

TO:

TO: Registration Se Division of Cor			
	N DESIGN LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Christopher Joel Ha	arrison	
		Name of Person	
	HARRISON DESIGN LLC	C	
		Firm/Company	<del></del>
	304 E Pine St, 110		
		Address	
	Lakeland, FL 3380		
		City/State and Zip Code	
	joel@studioharriso		Mr. Alexandre
For further information of	e-mail address: (	to be used for future annual report not all:	meation)
JOEL HARRISON		863 712-7700 at ()	
Name o	of Person		ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing 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 Addres Registration	<del></del>	<u>Street Address:</u> Registration Se	ection
Division of C		Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2020 / .. -9 /11 7: 28

If Changing Registered Agent, Signature of New Registered Agent

## HARRISON DESIGN 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 1/2/2015  Florida document number L1500000365	and assigned
Florida document number	
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 "L.L.C."
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, agent and/or the new registered office address here:	nter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street	nddress
	, 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 provisions of all statutes relative to the proper and complete performance of my dutic accept the obligations of my position as registered agent as provided for in Chapter being filed to merely reflect a change in the registered office address, I hereby confirmation.	es, and I am familiar with and 605, F.S. Or, if this document is

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>	<u>Address</u>	Type of Action
CEO	JOEL HARRISON	304 E PINE ST #110	
		LAKELAND FL 33801	□Remove
			■ Change
			□Add
			□Remove
			Change
<del></del>			□Add
			Change
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		Remove	
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<del></del>			□Add
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		<u></u>	□ Remove
			□Change

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ffective date, if o	other than the date of filing: (option	nal)
lote: If the date in:	isted, the date must be specific and cannot be prior to date of filing or more than 90 days after f iserted in this block does not meet the applicable statutory filing requirements, this we date on the Department of State's records.	date will not be listed a
record specifies a c is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day after the
April 7	2020	
<del>.</del>	/ Signature of a member or authorized representative of a member	
_	// (hristopher local +tarrius	
	Christopher and Harrison Typed or printed name of signee  Included to # 030  Charlet # 030	