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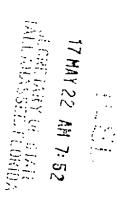
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## **COVER LETTER**

TO: Registration Section **Division of Corporations** The Color Black, 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: Ruth K. McDonald Name of Person Hathaway & Reynolds, P.A. Firm/Company 50 A1A North, Suite 108 Address Ponte Vedra Beach, FL 32082 City/State and Zip Code gregschwartzenberger@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 280-5575 Ruth K. McDonald

Enclosed is a check for the following amount:

Name of Person

■ \$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 ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Daytime Telephone Number

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Color Black, 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  $\frac{2/16/2015}{1}$ and assigned Florida document number \_L15000028797 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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida \_\_\_ Cirv

## 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 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	<u>Name</u>	Address	Type of Action
AMBR	Gregory A. Schwartzenberger, Jr.	28 Sherry Drive	
		Atlantic Beach, FL 32233	<b>□</b> Remove
			☐ Change
AMBR	Julie G. Schwartzenberger	28 Sherry Drive	□ Add
		Atlantic Beach, FL 32233	■ Remove
			☐ Change
AMBR	Gregory A Schwartenburger,	28 Sherry Drive	■ Add
	TR.and Jule G.	Atlantic Beach, FL 32233	
	Schwartenberger, as Co-Trustecs of the Gregory A Schwartenberg	C <del></del>	☐ Change
	Jr and Julie G		🗆 Add
	CO-Trustect of the Gregory A. Schwarzenberg  JR and Julie G  Schwartenberger Living Trust dated  March 6, 2013		□ Remove
	march 6, 2013		Change
			Add
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Effective date, if other tha	on the date of filing:			(optio	•a1)		
fan effective date is listed, the d <b>Note:</b> If the date inserted in document's effective date on	ate must be specific and ca this block does not mee	mnot be prior to d et the applicable		han 90 days after fi	ling.) Pursu		
ne record specifies a de The 90th day after th		e, but not a	n effective time	e, at 12:01 a.	m. on th	e earlie	er of:
Dated March 1		2017					
Jane	<del></del> `	<del></del> ·	•				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00