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(Re	questor's Name)	
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MAR 2 5 2020 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Dandy Details Events, LIC 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:
Tay Wy Bian ea
Dandy Details Frents, LCC Firm/Company
1222 N. Orange abl. Stc. A. Address
In fo City/State and Zip Code The Company of the C
For further information concerning this matter, please call:
Taylor Bian 10 at (727) 455 - 1808 Name of Person at (727) 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 & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

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Mailing Address:
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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2

Dandy Details E (Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L150000 10312</u> 0	
This amendment is submitted to amend the following:	.,
A. If amending name, enter the new name of the limited li	ability company here:
TAYION ROLE EVENTS: LLC The new name must be distinguishable and contain the words "Limited Li	ability 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)	1222 N. Orange AVC. Juite A Winter Park, FL 32789
Enter new mailing address, if applicable:	1222 N. Orange Avr.
(Mailing address MAY BE A POST OFFICE BOX)	Winter Park, FL 32789
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ce address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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 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
			□Add
			□ Remove
			□Change
			□Remove
			□ Change
			□Remove
			□ Change
<u>.</u>			
			□ Remove
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ffecti	ve date, if other than the date of filing: (optional)
	ctive 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	ent's effective date on the Department of State's records.
	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
d is fil	ed.
ated	March 5, 2020.
	Jayen bian en Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	\mathcal{J}