L1500013139

. (Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ac	ldress)	
(Ac	Idress)	
(Cí	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	ısiness Entity Naı	me)
— (Do	ocument Number))
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
	•	

Office Use Only



900285788149

900285788149 05/23/16-01012--028 **25.00

TERS MAY 23 P 2: 31 TORS TARY OF STATE ASSETS FLORIDA

MAY 2 7 2016

COVER LETTER

TO: Registration Section Division of Corporations	
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:	
Duan Ackins Name of Person	<u>.</u>
Duans Photography	
1656 Montecito Ave Address	
Deltara, FL 32788 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (863) 441-1019 Area Code Daytime Telepho	one Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$\$ Certificate of Status \$\times \text{Certified Copy}\$\$ (additional copy is enclosed)	1 \$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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Duxon's Pr	rotography LLC
	ty Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number <u>1500073139</u>	company were filed on 4/17/2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit THE HITS AND Craft Galk The new name must be distinguishable and contain the words "Lim	ited liability company here: Ited 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 ADDR	(ESS)
Enter new mailing address, if applicable:	7
Mailing address MAY BE A POST OFFICE BOX)	SA S
	OF STATE OR
 If amending the registered agent and/or registered agent and/or the new registered office add 	tered office address on our records, entertheutame of the neress here:
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 = Ms $AMBR = As$	anager ythorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗖 Add
			☐ Remove
			Change
			Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change
			Add
			□ Remove
		الله الله الله الله الله الله الله الله	El-Change
		ARY OF	
		101 71.S	ي L Remove

_ Change

110 10 10 10 10 10	
an effective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or note: If the date inserted in this block does not meet the applicable statutory filing occurrent's effective date on the Department of State's records.	ng requirements, this date will not be listed
e record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	ume, at 12:01 a.m. on the earlier
ated May 16, 2016. Wan 2. adkin	- r-0 - r-0 - r-0
Signature of a member or authorized representative	e of a member
	500 25
Dwan L. Adkins	AY 23
Typed or printed name of signee	2ે હે ડ્રે

Filing Fee: \$25.00