

L15000116947

Florida Department of State
Division of Corporations
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H15000234370

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CRAFTMADE Boynton, 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 July 13, 2015 and assigned Florida document number L15000116947.

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, 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

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

H15000234370

If preceding Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMER = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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MGR MATHEW BAUM 9652 RIDGESIDE CT. DAIN, FL 33328 ☒ Add

☐ Remove

☐ Change

MGR HOWARD BAUM 923 S. Townsend River Dr. FT. MYERS, FL 33919 ☒ Add

☐ Remove

☐ Change

MOOR OJ Buigas 12800 UNIVERSITY DR Suite 275 DAdd
FT. MYERS, FL 33907

 Remove

☐ Change☐ Add☐ Remove☐ Change

30 Add

☐ Remove

Change

☐ Add

 Remove

☐ Change

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DEPT. OF STATE
TALLAHASSEE, FLORIDA

100

H15000234370 other information, enter change(s) here: (Attach additional sheets, if necessary.)

15 SEP 30 AM 7:46
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED


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)

Note: 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 Sept. 29th 2015

Signature of a member or authorized representative of a memberHoward Baum

Typed or printed name of signer