# L500117423

(1	Requestor's Name)
(,	Address)
(,	Address)
(1	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
(	Document Number)
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# COVER LETTER

10.		on of Corpo			•	•	
CUDU	ЈЭ	D&D Design	ns LLC	•			
SUBJI	EC1: _		Name of Limi	ted Liability Company			
The en	closed A	rticles of A	mendment and fee(s) are subr	nitted for filing.			
Please	return al	l correspond	lence concerning this matter t	to the following:			
			Donna Adair				
				Name of Person		-	
			JD&D Designs LLC				
				Firm/Company	-	-	
			9920 Hindel Court				
				Address		_	
			Boynton Beach, FL 33472				
				City/State and Zip Code		-	
			donnaadair14@gmail.com			<b>三角</b>	
For fur	ther info	rmation con	E-mail address: (t cerning this matter, please ca	o be used for future annual report	notification)	JUL 20	
Donna	Adair			561 779-978 at ()			1.
		Name of F	erson	Area Code Da	ytime Telephone Numbe	AGRA ATATA	
Enclos	ed is a c	heck for the	following amount:				
\$2.	5.00 Fili	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Status	

MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

**STREET/COURIER ADDRESS:** Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JD&D Designs LLC		
(Name of the Limi	ted Liability Company as it now app (A Florida Limited Liability Compan	ears on our records.)
The Articles of Organization for this Limited L. Florida document number L15000117423	iability Company were filed on	July 8, 2015 and assigned
his amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company	<u>here</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," th	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	ुं ज
Inter new mailing address, if applicable:		20 LEI
Mailing address MAY BE A POST OFFICE	BOX)	工公里
		50 G
<ol> <li>If amending the registered agent and egistered agent and/or the new registered of</li> </ol>		on our records, enter the name of the
Name of New Registered Agent:	Donna Adair	
New Registered Office Address:	9920 Hindel Court	
<u></u>	Enter I	Florida street address
	Boynton Beach	, Florida <sup>33472</sup>
	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

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			□ Change
			Add
			Remove
		<del></del>	Add
			© Remove
			© Change
			Add Add
			Remove
			Change
			Add
			□ Remove
			□ Change
			Add
			□ Remove
			□ Changa

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fective da	ate, if other than the date of filing: (optional);
n 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 605.02 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed.
cument's	date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed effective date on the Department of State's records.
	ST ST
record :	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
The 90th	day after the record is filed.
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ted	$\frac{16}{2015}$
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	/ Ima / Jan
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00