L15000126497

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	· #)
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(Do	cument Number)	
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COVER LETTER

TO*	Registration Sec Division of Corp	tion porations		
SHELLE	Artistry & C	ompany, LLC		
SOBJEC	·1·	Name of Lim	ited Liability Company	
The encle	osed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspon	dence concerning this matter	to the following:	
		Ryon M. Jason	•	
			Name of Person	***
		Artistry & Company, LLC		
			Firm/Company	
		375 Emerson Plaza #511		
			Address	
		Altamonte Springs, FL 327	701	
		<u> </u>	City/State and Zip Code	
		ryonjason@gmail.com		
			to be used for future annual report	notification)
For further	er information co	ncerning this matter, please ca	all:	
Ryon M.	Jason		407 733-9973	
_	Name of	Person	Area Code Day	time Telephone Number
Ènclosed	is a check for the	following amount:		
\$25.0	O 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:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Artistry & Company, LLC			
(<u>Name of the Limited L</u> (A F	iability Company as it now applorida Limited Liability Compan	nears on our records.)	
The Articles of Organization for this Limited Liabil	ity Company were filed on	July 24, 2015	and assigned
Florida document number L15000126497	, company were mice wit		
Florida document number	 ·		
This amendment is submitted to amend the following	ng:		
A. If amending name, <u>enter the new name of the</u>	e limited liability company	<u>/ here</u> :	
The new name must be distinguishable and contain the words	"Limited Liability Company," t	he designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BO	<u></u>		
registered agent and/or the new registered office Name of New Registered Agent:			
New Registered Office Address:			
	Enter	Florida street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Regi	stered Agent:		
I hereby accept the appointment as registered agorovisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the register company has been notified in writing of this cha	nd complete performance ed agent as provided for i stered office address, I he nge.	of my duties, and I and Chapter 605, F.S. oreby confirm that the	m familiar with and Or, if this document is Limited liability
	Page 1 of 3	STA	

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
Pres	Jessie B. Malek	253 Kassik Circle	
		Orlando, FL 32824	≅ Remove
			Change
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Garden data in linear the data and	st be specific and cannot be prior to date of fitting of the	requirements, this date will not be list
: If the date inserted in this bl	ock does not meet the applicable statutory filing	s requirements, this date will not be have
: If the date inserted in this bl	ock does not meet the applicable statutory filing epartment of State's records.	s requirements, this date with hor be have
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If the date inserted in this bluent's effective date on the Decord specifies a delayed e 90th day after the reculanuary 14	ock does not meet the applicable statutory filing epartment of State's records. d effective date, but not an effective ti	
If the date inserted in this bluent's effective date on the Decord specifies a delayed e 90th day after the recularization.	ock does not meet the applicable statutory filing lepartment of State's records. d effective date, but not an effective tillord is filed.	
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