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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Registration Section Division of Corporations

SUBJECT:	Interior Des	sign Ingenuity, LLC		
object.		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Susan E. Devlin		
			Name of Person	
		Devlin Design Interiors, Ll	rc .	
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		8240 Lakewood Ranch Blv	vd. Apt. 1-414	
			Address	·
		Lakewood Ranch, Florida,	34202	
			City/State and Zip Code	
		sdevlinddi@gmail.com		
		. E-mail address: (to be used for future annual report notif	ication)
For further in	formation co	oncerning this matter, please ca	all:	
Susan E. De	vlin		616 393-6488	
	Name of	Person		Telephone Number
Enclosed is a	check for th	e following amount:		,
■ \$25.00 F	iling 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**

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SECNAL AND AN	5 PM 3:56
'''4SS	E. E. Silver

Interior Design Ingenuity, LLC

(Name of the Limited Liability Company as it now appears on our records.)

	(A Florida Ellitted	Liability Company)		"ASSEE FE SIMIL
The Articles of Organization for this Limited Ι	Liability Company	were filed on $\frac{09-22}{}$	-2015	and assigned
Florida document number 47-5114489	·			
This amendment is submitted to amend the fo	lowing:			
A. If amending name, enter the new name	of the limited lial	oility company here	:	
Devlin Design Interiors, LLC				
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the design	gnation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	No change to addre	ess.	
Principal office address MUST BE A STRE	ET ADDRESS)			
<i>5</i> ,	E BOX)			
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and	l/or registered o		ur records, <u>e</u>	nter the name of the
Mailing address MAY BE A POST OFFICE B. If amending the registered agent and	l/or registered o		ur records, e	nter the name of the
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and	l/or registered o		ur records, <u>e</u>	nter the name of the
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and registered agent and/or the new registered of the new	l/or registered o	<u>re</u> :		nter the name of the
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	d/or registered of office address here. No change	<u>re</u> :	ur records, <u>e</u>	nter the name of the
	d/or registered of office address here. No change	<u>re</u> :		

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 **Title** Name 1 **Type of Action** <u>Address</u> 115 Red Fox Ct. □ Add Kemove ☐ Change □ Add □ Remove □ Change □ Add □ Remove ☐ Change □ Add ☐ Remove □ Change □ Add □ Remove ☐ Change

tive date, if other than the date of filing:	The only change is the	business name. I	Formerly, Interio	r Design Inger	nuity, LLC. Ch	anged to new	business
Thank you. Thank	name of: Devlin Desig	gn Interiors, LCC	Roman	10 Mi	Cuppi	oahar	from
Thank you. Itive date, if other than the date of filing: (optional) (itive date, if other than the date of filing: (itive date, if other than the date of filing: (itive date is listed, the date is block does not most the applicable statutory filing or more than 90 days after filing.) Pursuant to 60 list the date is block does not meet the applicable statutory filing requirements, this date will not be list nent's effective date on the Department of State's records. (cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlest of the day after the record is filed. August 25				i = 0	0 × < 0 0 3	La Ma	, , , , , , , , , , , , , , , , , , ,
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Filing Fee: \$25.00