115000/69995

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
E		
W19-5	85561	

Office Use Only



800333502348

09/10/19--01019--007 **25.00

2019 H.D.: -4 PH 5: 27

R WHITE

NOV 0 4 2019

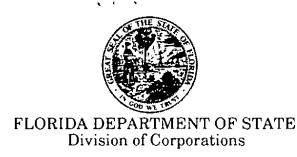
COVER LETTER

TO:	Registration Sec Division of Corp					
CHRIL		keting & Design LLC				
SUBJE	CI:	Name of Lim	ited Liability Company			
		Amendment and fee(s) are sub				
		Angel Miguel Alicea				
			Name of Person			
Empire Marketing & Design LLC						
Firm/Company						
	1943 Partin Terrace Rd					
			Address			
		Kissimmee, FL 34744				
		 	City/State and Zip Code			
		info@empiremarketingdesign.com / angel.alicea01@yahoo.com				
		E-mail address: (to be used for future annual report notifi	cation)		
For fun	ther information co	oncerning this matter, please co	all:			
Angel	Miguel Alicea		407 744-2317			
	Name of	Person	at () Area Code Daytime	Telephone Number		
Enclose	ed is a check for th	e following amount:				
\$25	5.00 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
Talluhassee, FL 32301



September 21, 2019

ANGEL MIGUEL ALICEA 1943 PARTIN TERRACE RD KISSIMMEE, FL 34744

SUBJECT: EMPIRE MARKETING AND DESIGN, LLC

Ref. Number: L15000169995

We have received your document for EMPIRE MARKETING AND DESIGN, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 519A00019578

Repekah White Regulatory Specialist II Supervisor

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22/9/11-4 PH 5:27

Empire Marketing & Design 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 Li	ability Company	were filed on 10/06/20	and assigned	
Florida document number L15000169995 This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
Empire Marketing & Design LLC				
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designat	ion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		1943 Partin Terrace Rd		
(Principal office address MUST BE A STREET ADDRESS)		Kissimmee, FL 34744		
Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)		1943 Partin Terrace R Kissimmee, FL 34744		
B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent:	~	ري ت:	records, enter the name of the new Angel Mignel Alicea	
Niana Davistarad (200 as Address)	1943 Partin Te	rrace Rd	· J	
New Registered Office Address:		Enter Florida stre	et address	
	Kissimmee		, Florida	
		Ciry	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.

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
CEO	Angel Miguel Alicea	1943 Partin Terrace Rd. Kissimmee, FL 34744	= Add
		5524 Sycamore Canyon Dr. Kissimmee, FL 34758	■ Remove
			Change
			
			□ Remove
			☐ Change
			Remove
		· · · · · · · · · · · · · · · · · · ·	☐ Change
			
			☐ Remove
			Change
			□ Remove
			☐ Change
		· · · · · · · · · · · · · · · · · · ·	□ Add
			☐ Remove
			□ Change

		····			
					
				,	
			. ==		
					
		*			
					
					_
				·-	
					
					
					
Note: If t	date, if other than the date of the date is listed, the date must be specified date inserted in this block does affective date on the Department.	es not meet the appli	icable statutory filing	requirements, this date	.) Pursuant to 605.020 will not be listed as
	I specifies a delayed effec th day after the record is		ot an effective ti	me, at 12:01 a.m.	on the earlier o
Dated	Sept 6	2019	<u>.</u> .		
			horized representative		

Page 3 of 3

Filing Fee: \$25.00