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JAN 05 2016 J SHIVERS CR2E049 (4/15)

605.0202 Amendment or restatement of articles of organization.— (1) The articles of organization may be amended or restated at any time.

- (2) To amend the articles of organization, a limited liability company must deliver to the department for filing an amendment, designated as such in its heading, which contains the following: (a) The present name of the company.
 - (b) The date of filing of the company's articles of organization.
- (c) The amendment to the articles of organization.
 - (d) The delayed effective date, as provided under s. 605.0207, if the amendment is not effective on the date the department files the amendment.
- (3) To restate its articles of organization, a limited liability company must deliver to the department for filing an instrument, entitled "Restatement of Articles of Organization," which contains the following:

 (a) The present name of the company.
- (b) The date of the filing of its articles of organization.
- (c) All of the provisions of its articles of organization in effect, as restated.
- (d) The delayed effective date, as provided under s. 605.0207, if the restatement is not effective on the date the department files the restatement.
- (4) A restatement of the articles of organization of a limited liability company may also contain one or more amendments to articles of organization, in which case the instrument must be entitled "Amended and Restated Articles of Organization."
- (5) If a member of a member-managed limited liability company or a manager of a manager-managed limited liability company knew that information contained in filed articles of organization was inaccurate when the articles of organization were filed or became inaccurate due to changed circumstances, the member or manager shall promptly:
 - (a) Cause the articles of organization to be amended; or
 - (b) If appropriate, deliver to the department for filing a statement of change under s. 605.0114 or a statement of correction under s. 605.0209.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shades of Depection LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chandria Williams	
Name of Person	
Shades of Depection LLC	
Firm/Company	
334 Johnson Ct.	
Address	
Ollando, Fl 3280 1 City/State and Zip Code Chandria 0707 agmail. com	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Chandria Williams #(352, 321-1937	 -
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee & Secretificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee & Secretified Copy (additional copy is enclosed) \$25.00 Filing Fee & Secretified Copy (additional copy is enclosed)	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

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

Shades of Depection LLC

Florida document number L 15000 2120	<u>14</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
Shades of Depiction	LLC	
The new name must be distinguishable and contain the words "Limi	ted 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 ADDI	ress) \ \ \/ \f	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	NA	
	**************************************	····
B. If amending the registered agent and/or registere	ed office address on our records, <u>enter t</u>	he name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent	N/H	-tud
Name of New Registered Agent:	<u>N/A</u>	16 16
Name of New Registered Agent: New Registered Office Address:	N/A N/A	16 JAN SCCRE
	N/A N/A Enter Florida street address	16 JAN -4 SCCRETARY ALTIANASSE
	N/A N/A Enter Florida street address	16 JAN -4 AM SCCREPARY OF ALLAHASSEE FI
		16 JAN -4 AM 7: Q
New Registered Office Address: , Florida	City	16 JAN -4 AM 7: 06 SUGRETURY OF STATE ALICANA SSEE FLORIDA
New Registered Office Address:	City	JAN -4 AN 7: OF STATIONAL SECURITIONS OF STATIONAL SECURITIES OF STATIONAL SECURITIONS OF STATIONAL SECURITIES OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIES OF STATIONAL SECURITIONS OF STATIONAL SECURITIES OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIES OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIES OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIES OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIES OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIONS OF STATIONAL SECURITIES OF STATIONAL SECURITIONS OF SECURITIONS OF SECURITIONS OF SECURITIO
New Registered Office Address: , Florida	City 1 Agent: and agree to act in this capacity. I furthe omplete performance of my duties, and I gent as provided for in Chapter 605, F.S.	SSEE TO SALE TO SEE TO SEE TO SEE TO SEE TO SE T
New Registered Office Address: , Florida New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and coacept the obligations of my position as registered ageing filed to merely reflect a change in the registere	City 1 Agent: and agree to act in this capacity. I furthe omplete performance of my duties, and I gent as provided for in Chapter 605, F.S.	SSEE TO SALE TO SEE TO SEE TO SEE TO SEE TO SE T

Page 1 of 3

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

E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirement of State's records.	
If the record specifies a delayed effective date, but not an effective time, at 12 The 90th day after the record is filed.	2:01 a.m. on the earlier of: (b)
Dated $12/29/2015$, 2015.	
Dated 12/29/2015, 2015.	
Signature of a member or authorized representative of a member	
Chandra Willian	7 S = 10
Typed or printed name of signee	L 3
D	AN -4 ETVRO HASSE
Page 3 of 3 Filing Fee: \$25.00	
	7: 0

I	am only Amendins the Correct
	Spelling of My LLC's Name
	The correct spelling is.
	shades of Depiction LLC.
//	with an i not an E'
- 	
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