8/23/2021



Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000315336 3)))



H210003153363ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name ; LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:				

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AMH INTERIORS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

AUG 2 4 2021

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

2021 AUG 23 AM 10: 1

1/1

Page: 3 of 6

COVER LETTER

TO:	Registration Se Division of Cor							
C1111112		AMH INTERIORS, LLC						
Name of Limited Liability Company								
		Amendment and fcc(s) are sub-						
		Cheyenne Moseley						
			Name of Person					
		Legalzoom.com, Inc.						
			Finn/Company					
		101 N Brand Blvd 11th Fl						
		Address						
	٠.	Glendale, CA 91203						
			City/State and Zip Code					
ann@amhinteriors.com								
		E-mail address: (to be used for future annual report notification)						
For furt	her information c	onceming this matter, please ca	all:					
Cheyen	me Moseley		800 773-0888					
	Name o	f Person	Area Code Daytime	Telephone Number				
Enclose	d is a check for t	re following amount:						
□ \$ 25	,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)				
	MAII.	ING ADDRESS:	STREET/COURI	ER ADDRESS:				

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

AMH INTERIORS, LLC				
(Name of the Limited	Linhility Compan Florida Limited Li	y as it now appea ability Company)	rs an our records.)	
The Articles of Organization for this Limited Liab Florida document number 1.1600016916	pility Company v	vere filed on 0	/25/2016 and assign	
This amendment is submitted to amend the follow	vina.			2021 AUG 23
A. If amending name, enter the new name of t		ity company h	cre:	6 23
AMH Interiors Studio, LLC				- To-
The new name must be distinguishable and contain the work	ds "Limited Liabilit	y Company," the	designation "LLC" or the abbreviation "L.L.C	AM 10:
Enter new principal offices address, if applicat				بن 13—
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE Bo	<u>OX)</u>			
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	r registered off ce address here	ice address o	n our records, enter the name of	the new
New Registered Office Address:				
New Registered Office Address.	Enter Florida street address, Florida City Zip Code			
		Ciņ	Zip Code	
New Registered Agent's Signature, if changing Re	gistered Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registabeing filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of	r and complete pered agent as peregraphical agent as peregraphical agent agent agent agent agent agent agent a The complete agent ag	performance o provided for in	f my duties, and I am familiar with a Chapter 605, F.S. Or, if this docum	and ent is
	if Char	olno Registered 3	spent. Signature of New Registered Agent	_

From: Sarah Acevedo

_Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

To: +18506176383

MGR = Mannger AMBR = Authorized Member					
<u>Title</u>	Name	Address	Type of Action		
			🗅 ^dd		
			C Remove		
		· · · · · · · · · · · · · · · · · · ·	O Change		
			Remove		
			Change		
			🖸 Remove		
			Change		
			Remove		
			Change		
			D Add		
			□ Remove		
			Change		
			Remove		

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
	2021	sitt SIVIĆ
	AUG 23	ON OF
		TY OF STA
	AM 10: 1	KATIBA
	7	
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 90 days after filing.) Pursuant to 605.03 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	07 (3)(li as the	·)
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier (b). The 90th day after the record is filed.	of:	
Dated August 15 2021. An Marie Here		
Signature of a member or authorized representative of a member		
Ann Marie Hess Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00