

L16000097644

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED  
2016 MAY 27 P 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 01 2016

SWANSON

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

SIGNATURE WEDDINGS AND EVENT PLANNING 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 Liability Company were filed on 05/18/2016 and assigned  
Florida document number L16000097644.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)**

8353 ROYAL PALM BLVD

CORAL SPRINGS, FL 33065

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

8353 ROYAL PALM BLVD

CORAL SPRINGS, FL 33065

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

8353 ROYAL PALM BLVD

*Enter Florida street address*

CORAL SPRINGS

*City*

, Florida 33065

*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.*

If Changing Registered Agent, Signature of New Registered Agent

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FLORIDA

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>	<u>Type of Action</u>
MGR	SOPHIA C ROSE-LYN	8353 ROYAL PALM BLVD	<input checked="" type="checkbox"/> Add
		CORAL SPRINGS, FL 33065	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	REIDS INCOME C COMPUT	8353 ROYAL PALM	<input type="checkbox"/> Add
		CORAL SPRINGS, FL 33065 US	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change


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2015 MAY 27 P 3:07  
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TALLAHASSEE, FLORIDA

[illegible]

(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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

  
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

SOPHIA C. ROSE-LYN

Typed or printed name of signee

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**Filing Fee: \$25.00**

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2516 MAY 27 P 3:07  
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