

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L14000098924

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((H23000316162 3)))



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Division of Corporations
Fax Number : (850)617-6383

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

Email Address: EFILE1234@INCFILE.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CRISSIEN ONLINE, LLC

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Corporate Filing Menu

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COVER LETTER

(((H23000316162 3)))

TO: Registration Section
Division of Corporations

SUBJECT: CRISSIEN ONLINE, 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:

LOVETTE DOBSON

Name of Person

Firm Company

17350 STATE HWY 249 #220

Address

HOUSTON TX 77064

City, State and Zip Code

EEFILE1234@INCFILE.COM

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

LOVETTE DOBSON

8884623453

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

(((H23000316162 3)))

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

(((H23000316162 3)))

CRISSIEN ONLINE, 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 05/20/2016 and assigned
Florida document number L16000098924

This amendment is submitted to amend the following:

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

CRISSIEN VENTURES LLC

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:

3100 Se Federal Highway #1113
Stuart, FL 34994

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

3100 Se Federal Highway #1113
Stuart, FL 34994

(Mailing address MAY BE A POST OFFICE BOX)

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:

Enter Florida street address

Florida

City

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

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	ISC Creative Ventures LLC	476 Se Bloxham Way	☒ Add
		Stuart, FL 34997	☐ Remove
			☐ Change
AMBR	CRISSIEN, IAN	2913 QUANTUM LAKES DR	☐ Add
		BOYNTON BEACH, FL 33426	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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15 If appending any other information, enter change(s) here: + *breakdown* - *cases* - *accession* =

It is assumed that the probability of a node i being selected for a particular iteration is proportional to its degree, i.e., $\frac{d_i}{\sum d_i}$. The probability of a node i being selected for a particular iteration is proportional to its degree, i.e., $\frac{d_i}{\sum d_i}$.

Notes: 1. This document is not intended to be used for filing with the applicable statutory filing requirements. This document will not be filed with the applicable filing date on the Department of State's records.

$\gamma_{\text{indirect}} = \text{indirect effects}$ = difference between effective power in 12- and 6-month studies = 10% (the difference between

2023

Jan. Higgins

22 APR 68 MEMPHIS CIVIL RIGHTS DIVISION

Jan Onissen, Authorized Representative of ISC Creative Ventures LLC