## L16000147588

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MAY 25 **2017** S. YOUNG

SECRETARY OF STATE STATE STATE STATE

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:		NG, LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Michael Young			
		Name of Person			
		Iconica Furniture LLC			
		Firm/Company			
		779 <b>0</b> NW 10th St			
		Address		古路	
		Plantation, FL 33022			
	• • • • • • • • • • • • • • • • • • • •	City/State and Zip Code		SSEE SSEE	
	Iconica Furniture LLC Firm/Company  779 NW 10th St Address	<b>22</b>			
For further information		•		ASSEE, FLORIUM 24 PM 2: 31	
Name	of Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for	the following amount:				
<b>☑</b> \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee &. Certified Copy (additional copy is enclosed)	□ \$60.00 Filing I Certificate of Certified Cop (additional copy	Status & y	
Regis	LING ADDRESS: stration Section	STREET/COUR Registration Section of Corne	on		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	YNG, I					
( <u>Name of the Limited</u> (A	Liability Company Florida Limited Lia	y as it now appears ( ability Company)	on our records.)			
The Articles of Organization for this Limited Liab	• • •	vere filed on	August 10, 2016	and assig	ned	
Florida document numberL1600014758	<u> </u>					
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited liabili	ity company her	<u>2</u> :			
Iconica Furnitu					<u>.</u>	
The new name must be distinguishable and contain the wor	ds "Limited Liabilit	y Company," the des	ignation "LLC" or the ab	breviation "L.L.	C."	
Enter new principal offices address, if applicable:		77) NW 10th St				
(Principal office address MUST BE A STREET ADDR		Plantati	on, FL 33022		<del></del>	
Enter new mailing address, if applicable:		77 <b>91</b> NW	10th St	THAY	THE PERSON	
(Mailing address MAY BE A POST OFFICE Be	<u>OX)</u>	Plantatio	12	13.5° 13.5°		
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, <u>enter</u>	the name 20	the liew	
Name of New Registered Agent:	Michael Young			<del></del>		
New Registered Office Address:	7991	NW 10th St				
		Enter Florid	a street address			
		Plantation	, Florida	33022		
		City		Zi <del>o</del> 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

If amending Authorized Person(s) authorized to manage,  $\underline{enter\ the\ title, name, and\ address\ of\ each\ person\ being\ added}$  or retnoved from our records:

MGR = M $AMBR = A$	lanager uthorized Member				
<u>Title</u>	Name	Address	Type of Action		
Mar	Michael Young		Add		
			□ Remove		
		779 NW 10th St Plantation, FL 33022	☐ Change		
			Add		
			□ Remove		
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							72
ffective date, i	f other than the of s listed, the date must	late of filing		. 1 . COU.	4h 00	(optional)	<u>မ</u> 
Note: If the date	inserted in this blo tive date on the De	ck does not me	eet the applica	able statutory f	lling requirem	ents, this date wil	I not be listed
e record spec The 90th da	cifies a delayed y after the reco	effective da rd is filed.	ate, but no	t an effectiv	e time, at :	12:01 a.m. on	the earlier
ated	May, 20	······································	2017	<u> </u>			
		114					
	)	<u>U. L.</u>		orized representa			<del></del>
		Signature offa m	nember or autho	rized representa	tive of a memb	er	

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Filing Fee: \$25.00