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(Re	equestor's Name)	. <del>.</del>
(Ad	idress)	_
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(Cit	ty/State/Zip/Phone	e #)
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# **COVER LETTER**

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TO: Registration S Division of Co	rporations		
SUBJECT:	ANTIQUES & 1	ART AUCTION G	ALLERY
	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	emitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	PE	EDRO BODDEN	
		Name of Person	
	ANTIQUES	& ART A UCTION Firm/Company	GALLERY
	14629	SW 104 ST #	197
	MIAMI	Fl., 33166  City/State and Zip Code  250 1 99 0 9 mail to be used for future annual report notion	
	antique E-mil address: (	25artag @ g mai to be used for future annual report noti	/ · COM fication)
_	concerning this matter, please co		
TEDA	O BODDEN	at ( <u>7-86)</u> <u>370</u> Area Code Daytim	- 2428
Name	of Person	Area Code Daytim	e 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F	ILED
70%	1 -
MILAHASE	TO PH 4: 33 TOF STATE EE, FLORIO.
	EE, FLORIO.

ANTIQUES & (Name of the Limited)	ART A	JUCTION	GALLERY	- AHASSEE, FLORING
(Name of the Limited) (A	Liability Company Florida Limited Liab	as it now appears oility Company)	on our records.)	
The Articles of Organization for this Limited Liab Florida document numberL /600/632		ere filed on	18 /31/2014	and assigned
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of the	e limited liabilit	y company her	<u>e</u> :	
The new name must be distinguishable and contain the word	ls "Limited Liability	Company," the des	ignation "LLC" or the abbr	eviation "11.,C."
Enter new principal offices address, if applicable	le: _			
(Principal office address MUST BE A STREET A	<u>ADDRESS)</u>	<del> </del>		
	-		- · · · · · -	
Enter new mailing address, if applicable:	-			
(Mailing address MAY BE A POST OFFICE BO	<u> </u>			
	-			<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered offic		e address on o	our records, <u>enter tl</u>	ne name of the new
Name of New Registered Agent:	PEDRO	BODDE	'N	
New Registered Office Address:	24424	SW 115	ct. PRINCETOR	H. 33032
	$\mathcal{D}_{\mathbf{a}}$	Enter Florid	a street address	~~~~
-	1 KINC	E TON City	a street address, Florida	33032 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

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>	Address	Type of Action
MGR	JONATHAN BODDEN	14629 SW 104 St	□ Add
		#197, MIAMI,	Remove
		F1. 33186	Change
MGR.	PEDRO BODDEN	14629 SW 104 St	Add
		#197 MIAMI	□ Remove
		Fl. 33186	☐ Change
			Add
			Relieve
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f an ef Note:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	$\frac{1}{1} + \frac{1}{1} = \frac{1}$
	in the second se
	Signature of a member or authorized representative of a mombar
	Jongthan Bodden.

Page 3 of 3

Filing Fee: \$25.00