

L16000177406

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(City/State/Zip/Phone #)

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2017 JAN 11 PM 12:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

JAN 13 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Anything But Advertising, 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:

Claire Kleiman

Name of Person

Anything But Advertising, LLC

Firm/Company

4226 Saltwater Blvd.

Address

Tampa, FL 33615

City/State and Zip Code

claire@anythingbutadvertising.com

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

For further information concerning this matter, please call:

Claire Kleiman

Name of Person

at (407) 227-8867

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Anything But Advertising, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA  
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The Articles of Organization for this Limited Liability Company were filed on Sept 21, 2016 and assigned  
Florida document number 81-3914923 L16000177406

This amendment is submitted to amend the following:

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

n/a  
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)

4226 Saltwater Blvd  
Tampa FL 33615

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

(Mailing address MAY BE A POST OFFICE BOX)

n/a

**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:

Claire Kleiman

New Registered Office Address:

4226 Saltwater Blvd.

*Enter Florida street address*

Tampa, Florida 33615  
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.*

Claire Kleiman  
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>	<u>Address</u>	<u>Type of Action</u>
MGR	Claire Kleiman	4226 Saltwater Blvd Tampa FL 33615	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Georg Garnitschnig	2601 NE 14th Ave Apt 104 Ft Lauderdale, FL 33334	<input checked="" type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated 10<sup>th</sup> January, 2017.

Claire Klerman

Signature of a member or authorized representative of a member

Claire Kleiman

Typed or printed name of signee