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T. MATTHEWS JAN 2 1 2022

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
Luminaire,	LLC		
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Name of Limited Liability Company anclosed Articles of Amendment and fee(s) are submitted for filing. Freturn all correspondence concerning this matter to the following: Angel Soldano Name of Person Haworth, Inc. Firm/Company One Haworth Center Address Holland, MI 49423 City/State and Zip Code angel.soldano@haworth.com E-mail address: (to be used for future annual report notification) rther information concerning this matter, please call:		
Please return all correspo	ondence concerning this matter	to the following:	
	Angel Soldano		
		Name of Person	
	Haworth, Inc.		
		Firm/Company	
	One Haworth Center		
		Address	· · · · · · · · · · · · · · · · · · ·
	Holland, MI 49423		
		City/State and Zip Code	
	_		
			lication)
For further information co	oncerning this matter, please co	all:	
Angel Soldano		at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for th	ne 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 Addres		Street Address:	ation.
Registration Section Division of Corporations		Registration Sec Division of Cor	
P.O. Box 632	•	The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22 11 14 811 3: 23

Luminaire, LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records. Liability Company)	
The Articles of Organization for this Limited Liability Company	y were filed on April 12, 2017	and assigned
Florida document number PO2-25042		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility 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)		
Enter new mailing address, if applicable:	-	
Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new register
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street address	
	Flor	rida
	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 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	NKL Holdings, Inc.	8950 NW 33RD Street	□ Add
		Miami, FL 33172	≡ Remove
			□Change
MGR	Haworth, Inc.	One Haworth Center	= Add
		Holland, MI 49423	□ Remove
			Change
			□ Add
			□ Remove
			[]Change
			□ Add
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fective date, if oth	er than the date of fi	iling:		(optional)	
an enecuve date is usie	ted in this block does n	not meet the appl	icable statutory f			
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Filing Fee: \$25.00