## 117000 100084

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2019 SEP - 9 PM 5: 39



## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

Artisan Window Fashions, LLC (Name of the Limited Liability Company as it now appears on our records.)

(A Fiorital Elimited Elability Company)		
The Articles of Organization for this Limited Liability Company were filed on L17000190084	and assigned	
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company he	ere:	
The new name must be distinguishable and contain the words "Limited Liability Company," the d	designation "LLC" or the abbreviation "L.L.C."	_
Enter new principal offices address, if applicable:	2	
(Principal office address MUST BE A STREET ADDRESS)	77 99	<del></del> ,
	SEP	. £ _ ;;
	t t	. m
Enter new mailing address, if applicable:	75% P	 
(Mailing address MAY BE A POST OFFICE BOX)	Ū., <del>⊸.</del>	
	w	_
<del> </del>	<u> </u>	_
B. If amending the registered agent and/or registered office address on registered agent and/or the new registered office address here:	n our records, <u>enter the name of the</u>	печ
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	_
New Registered Office Address:		
Enter Flor	rida street address	_

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida \_

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Rosa McNeil	691 Garden Commerce Pkwy, Ste 100, Winter Garden, FL34787	Add
			■ Remove
			Change
			□ Add
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f an effi Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	September 9 2019
	$\overline{\mathcal{D}}$
	Mosa fichel
	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00