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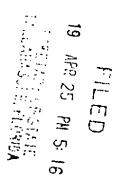
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O SIMMONS

## **COVER LETTER**

TO: Registratio Division of	n Section Corporations		
SUBJECT:	Name of Limi	DICAS DO	Signs LLC.
The enclosed Articles	s of Amendment and fee(s) are subr	nitted for filing.	
Please return all corre	espondence concerning this matter t	o the following:	
		Michelle Sc.	LORTINO
	D. CARO	Firm/Company	
	450	NE 20th Street	56 115
		City/State and Zip Code	
	E-mail address: (to	dow Treatsh To be used for future annual report notific	Acl-Com
For further information	concerning this matter, please call	:	
Michelle Name	SCL CRTINO of Person	at (SG() 44755 Area Code Daytime	133 Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee		☐ \$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

DICASA D	lesigns LLC	
( <u>Name of the Cimited Liability Compai</u> (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number		<u> </u>
This amendment is submitted to amend the following:		P O
A. If amending name, enter the new name of the limited liabi	lity company here:	(A) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Michelle Scia	etino
(Principal office address MUST BE A STREET ADDRESS)	30CA Roton F	Street St2115 -L 33431
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	BOCA Poles	th Street, Ste (15, 74.31
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ter the name of the new
Name of New Registered Agent: M(C)	helle Sciontino.	
New Registered Office Address:	SO NE 20th Street Enter Florida street address	t. se 115
Ban	City , Florida	33431 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.

f 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	Duthouy SciorTi	no 22221 Martella	<u>Ace:</u> □ Add
		BOCH Roten FL 3343	3 Remove
			Change
			□ Add
			Remove
		<del>。</del> 	Change
		7	- Gradd
			P D Bemove
			□ Remove
			Change
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Effective date, if other than the date of filing:				
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Effective date, if other than the date of filing:  April 22 20(1 (optional))  f 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  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The erecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier the 90th day after the record is filed.				
Effective date, if other than the date of filing:				
Effective date, if other than the date of filing:				<u>,</u>
Effective date, if other than the date of filing:  And 2220() (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  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier the 90th day after the record is filed.	G F		<u> </u>	
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The 90th day after the record is filed.	ys after filing.) Pursuant to 605.0207	nd cannot be prior to date of filing or more that meet the applicable statutory filing requ	is listed, the date must be specific and te inserted in this block does not r	fan effective date is l Note: If the date ir
Dated 4 22 19	:01 a.m. on the earlier of			
			12/19	Dated \
Signature of a member or authorized representative of a member		a member or authorized representative of a m	Signature of a	<del></del>

Page 3 of 3

Filing Fee: \$25.00

To whom it may concern

I, Anthony Sciortino, Am transfering all my Rights and shares of Dicasa Designate Tomichelle Sciortimo As per our divorce regreements she Michelle Sciortino vill No become only managing member of Diction 1900. DICOSA Designs LLC.

thank jou.

Anthony SciorTiNO

561 445-5133.

22221 Martella AUE

BOCH Pate FL 33433

M. Scionin Michelle ScionTiNO. 661)445 4886