## 117000208974

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: CREATIVE WEST FLC  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:
WESTY Blandon Name of Person
MEATIVE WEST LLC Firm/Company
9141 NW 112 VTYPET. Address
HIGIPAN GAY City/State and Zip Code
Ange plana 21 c Gmay 1. 40 m  Hmail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
WESTEY BLANDON at (784) 342-4053 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\Bigcup \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$ 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



December 8, 2017

WESLEY BLANDON 9161 NW 112 STREET HIALEAH GARDENS, FL 33018

SUBJECT: CREATIVE WEST LLC Ref. Number: L17000208974

We have received your document for CREATIVE WEST LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 617A00024862

RECEIVED

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u> </u>	- LLC		an magnification	
(X)	Florida Limited L	ny as it now appears on ot nability Company)	ir records.)	
The Articles of Organization for this Limited Liabi Florida document number <u>L170002089</u>	lity Company	were filed on 10\00	112017 and assign	ed
This amendment is submitted to amend the followi	ng:			
A. If amending name, enter the new name of th	<u>e limited liabi</u>	lity company here:		
The new name must be distinguishable and contain the words	s "Limited Liabili	ty Company," the designat	ion "LLC" or the abbreviation "L.L.C.	
Enter new principal offices address, if applicable:		9161 NW 112 street		
(Principal office address MUST BE A STREET ADDRESS)		Hialean	gardens Fr 3301	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	rame as	above 1	
B. If amending the registered agent and/or registered agent and/or the new registered office			records, enter the name of	the ne
Name of New Registered Agent:	Nestey	Blandon		
New Registered Office Address:	vapue a	S ADDVLT Enter Florida stre	et address	
_			, Florida	
		Cuy	Zip Code	
and the Property of the Country of t				

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 Address Type of Action Title <u>Name</u> \_\_\_\_\_ □ Remove \_\_\_\_\_\_ Change \_\_\_\_\_ Add \_\_\_\_ □ Remove \_ 🗆 Add \_\_\_\_ 🗀 Change \_□ Remove \_\_\_ Change .73 ☐ Add

\_\_\_\_\_ 

Remove

\_\_\_\_ Change

	er information, enter change(s) here: (Attach additional sheets,	y necessary.)
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I an effective date is liste <b>Note:</b> If the date inser	er than the date of filing:  I, the date must be specific and cannot be prior to date of filing or more than 90 date of this block does not meet the applicable statutory filing requirement ate on the Department of State's records.	
	a delayed effective date, but not an effective time, at 13 er the record is filed.	2:01 a.m. on the earlier o
Dated	ΛΛ	201
_	a. Wh	مست د
	Signature of a member or authorized representative of a member  We stay Blandon  Typed or printed name of signer	
	Wilsiay Blandon	
<del></del>	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00