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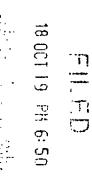
(Requestor's Name)
(Address)
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(Document Number)
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10/19/18--01008--029 **25.00



COVER LETTER

TO: Registration Section Division of Corpor				
_{subject:} Knobs	&Knobs Hard	ware LLC		
SUBJECT:		ed Liability Company		
The enclosed Articles of Am	endment and fee(s) are subn	ntted for filing.		
Please return all corresponde	ence concerning this matter to	o the following:		
	Suramy Cha	rlestant		
		Name of Person		
	480 NE 175	Firm/Company		
		-		
	North Miam	i Beach, FL 3	33162	
		City/State and Zip Code		
_	Coevadi@gr			
		be used for future annual r	eport notification)	
For further information conc		78620	052998	
Suramy Charl	estant	at ()		
Name of Pe	rson	Area Code	Daytime Telephone N	lumber
Enclosed is a check for the fo	ollowing amount:			
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encle	Co oked) Ce	0.00 Filing Fee, entificate of Status & entified Copy ditional copy is enclosed)
	GADDRESS:	-	COURIER ADDRE	CSS:
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Knobs&knobs Hardware LLC

(Name of the Limited Liabilit (A Florida	y Company as it now app	oears on our records.)	
		12/27/2017	
The Articles of Organization for this Limited Liability Conference Laborated Liability Laborated L	ompany were filed on	12/27/2017	_ and assigned
Florida document number L17000202143	_·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company	<u>here</u> :	
Coeva Design And Interiors	LLC		
The new name must be distinguishable and contain the words "Limi	ted Liability Company," tl	he designation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	ESS)	·	<u> </u>
		•	——————————————————————————————————————
		•	· ·
Enter new mailing address, if applicable:		<u>, -: , , , , , , ,</u>	25 <u>11</u>
(Mailing address MAY BE A POST OFFICE BOX)			
			. 0
B. If amending the registered agent and/or registered agent and/or the new registered office address agent and/or the new registered office address agent. Name of New Registered Agent:			
New Registered Office Address:	Enter	Florida street address	
	City	Florida	Zip Code
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co- accept the obligations of my position as registered ag- being filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete performance ent as provided for i	of my duties, and I am far n Chapter 605, F.S. Or, if	niliar with and this document is
	If Changing Registered	Agent, Signature of New Regis	tered 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 =	AMBR = Authorized Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action	
· 			□ Add	
			□ Remove	
		 		
			□ Remove	
			∴ ☐ Change	
			DXod T	
			- Remove-	
		46-20-4	Add	
		 	Remove	
			Change	
			Add	
			☐ Remove	
			☐ Remove	
			□ Change	

. If amending any other information, enter change(s) here: (Attach additional sheets, if n			
		<u></u>	_
			_
Changing business name.			_
Old name: Knobs&Knobs Hardware LLC			-
New name: Coeva Design And Interiors I	_LC		-
		18 (_ _
	·	<u> </u>	— <u>"[]</u>
	· ·	10	T.
	<u> </u>	6: 50	
Effective date, if other than the date of filing:	etional)		
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days a Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	fter filing.) Purs this date will	suant to 6 not be li	05.0207 () sted as ti
the record specifies a delayed effective date, but not an effective time, at 12:0 The 90th day after the record is filed.	1 a.m. on t	he ear	lier of:
Dated (210bcv 16 . 2018 .			
Signature of a member or authorized representative of a member Suramy Charlestant	, ,		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00