Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H200001774763)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRUCKING PERMITS AND MORE LLC

Account Number : I20140000047 Phone : (813)774-4726 : (813)877-2186 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_

2020 JUNET 1 KITTE 54

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ARTISAN NEO WOODWORK LLC

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JUN 12 2020

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Registration Section

TO:

### **COVER LETTER**

Div	ision of Corp	porations		
oun mor		NEO WOODWORK LLC		
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return	all correspo	ndence concerning this matter t	to the following:	
		ESPINACO, NOSMARYS		
		ARTISAN NEO WOODW	Name of Person ORK LLC	
		3150 th 46 AVE NORTH	Firm/Company	<del></del>
	Address ST PETERSBURG , FL 33714			
		espinacon @gmail.com	City/State and Zip Code	
For further in	nformation c	E-mail address: (to the concerning this matter, please ca	o be used for future annual report notif tll:	leation)
ESPINACO	, NOSMAR	r's	727 6860199	
	Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclosed is	a check for th	ne following amount:		
□ \$25.00 F	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)
	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clitton Building 2661 Executive Ce	n autions

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF 2020 JUNE 11 ANTH: 55

ARTISAN NEO WOODWORK LLC	·
(Name of the Limited Liability Company as it now appears on our records (A Florida Limited Liability Company)	, , , , , , , , , , , , , , , , , , , ,
The Articles of Organization for this Limited Liability Company were filed on $\frac{02/06/2018}{\text{Florida document number}}$	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
NEO ARTISAN WOODWORK LLC	
The new name must be distinguishable and contain the words "Limited Liability 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)	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>
	·
B. If amending the registered agent and/or registered office address on our records registered agent and/or the new registered office address here:	, enter the name of the new
Name of New Registered Agent:	
Name of their registered rigers.	
New Registered Office Address:    Finer Florida street address	<u> </u>
Flo	orida
•	My states
New Registered Agent's Signature, if changing Registered Agent:	4 12 .1
I hereby accept the appointment as registered agent and agree to act in this capacity. I fur provisions of all statutes relative to the proper and complete performance of my duties, an accept the obligations of my position as registered agent as provided for in Chapter 605, to being filed to merely reflect a change in the registered office address, I hereby confirm the company has been notified in writing of this change.	d Lam familiar with and F.S. Or, if this document is

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 = M AMBR = A	lanager .uthorized Member	2020 JUTETT ARTH: 55	
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			Add
			Remove
			Change
			☐ Remove
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ffectiv	e date, if other than the date of filing:
ian etied Note: Ti	tive date is usted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	nt's effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
d is file	d.
	2020
Dated _	10/6
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00

Typed or printed name of signce