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SECRETARY OF STATE ALLAHASSEE, FLORID,

FILED

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Jessica Stewart Design, LLC 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:
Jessica Stewart Name of Person
Jessica Stewart Design, LLC
7529 Catawba Dive
Jacksonville FL 32217 City/State and Zip Code
City/State and Zip Code  1 NFO D 1 LSG1 CA S+ WWY ALSG (M. COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TESSICA STEWAY at (407), 413-12365  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$60.00 Filing Fee, Certifica

### 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

		•			
Jessica Stewa Name of the Limited I		ad it now appears ability Company)	on our records.)		
The Articles of Organization for this Limited Liabil Florida document number	lity Company v Te	were filed on $N$	arch 28,	2018 and ass	igned
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liabil	ity company her	<u>'e</u> :		
The new name must be distinguishable and contain the words	"Limited Liabilit	y Company," the des	signation "LLC" or t	he abbreviation "L.	L.C."
Enter new principal offices address, if applicable	2:				
Principal office address MUST BE A STREET A	DDRESS)				
Enter new mailing address, if applicable:				···: -	
(Mailing address MAY BE A POST OFFICE BO)	<u>K)</u>		/		
B. If amending the registered agent and/or registered agent and/or the new registered office  Name of New Registered Agent:			our records, en	TAL SS	5
	<del></del>	······································		CRETA.	77
New Registered Office Address:  New Registered Agent's Signature, if changing Regi	<del>-</del>	City	da street address , Floride	SEE, FLORIDA	ILED
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the region company has been notified in writing of this cha	nd complete p ed agent as pr stered office a	performance of n rovided for in Cl	ny duties, and Lo hapter 605, F.S.	um familiar with Or, if this docu	h and ment 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 $AMBR = A$	anager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
AMBR	Jessica Stewart	7829 Catawba Drive Jacksonville, FL 32217	Add
		Jacksonville, FL 32217	Pemove
			Change
			□ Remove
		<del>,</del>	Change
			Add
		<del></del>	Remove
		<del>4</del>	Change
		<del></del>	Add
			□ Remove
		<del></del>	Change
***************************************			Add
			□ Remove
			Change

\_□ Add

☐ Remove

☐ Change

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	MAKC	h 28 2018		
ective date, if other than the date n effective date is listed, the date must be sp	ecific and cannot be prior	to date of filing or more th	(optional) an 90 days after filing.) Pursuant	to 605.020
te: If the date inserted in this block de cument's effective date on the Departr			uirements, this date will not l	be listed a
ounom a virour v unto on mo popula	ion or built s records	•		
record specifies a delayed effe	ective date, but no	at an effective time	. at 12:01 a.m. on the	earlier o
The 90th day after the record i	s filed.		, de 12.01 dilli dil dic	cuinc. c
ted April 18		•		
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Page 3 of 3

Filing Fee: \$25.00

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