7/21/22, 12:18 PM

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Division of Corporations



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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

FLOWER WALL RENTALS LLC

Certificate of Status	0
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Help

From: Yanet

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022-07-21 16:34:49 GMT

FLOWER WALL RENTALS LLC			
(Name of the Lim	ited Liability Company (A Florida Limited Liab	as it now appears on our re oility Company)	cords.)
The Articles of Organization for this Limited I Florida document number	Liability Company wo	ere filed on <u>04/10/2018</u>	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liabilit	y company here:	
FWR FLOWERWALLS & DESIGN 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 appli	cable:		202
(Principal office address MUST BE A STRE			2 Ј
		•	= -
	-		2 = ;
Entan none mailing address if applicables			_ 50
Enter new mailing address, if applicable:	· pava		. ~
(Mailing address MAY BE A POST OFFICE	<u>. BUA)</u>	·····	
	•	 	
B. If amending the registered agent and/or agent and/or the new registered office addresses	ess here:	dress on our records, <u>er</u>	nter the name of the new registered
Name of New Registered Agent:	TIFFANY ORS	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	7885 NW 165 TE	RRACE	
		Enter Flortda street at	
	MIAMI LAKES		, Florida ³³⁰¹⁶ Zip Code
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	per and complete per istered agent as pro registered office ac	erformance of my dutie, ovided for in Chapter 6	s, and I am familiar with and 05, 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:

From: Yanet

MGR = Manager AMBR = Authorized Member

To:

Title	Name	Address	Type of Action
AMBR	TIFFANY ORS	7885 NW 165 TERRACE	
		MIAMI LAKES, FL 33016	
			≡ Change
			□Change
***********			∐Add
			□Remove
			[]Change
			□Add
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

Page; 5 of 5

Effective date, if other than the date of filing: (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 605.0207 (Note: if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it 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 of: (b) The 90th day after the ord is filed. Dated O7/20 Signature of a member or authorized (Expresentative of a member					, -			
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 of: (b) The 90th day after the port is filed. Dated 07/20 , 2022								
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