

AUD 0 2020

` ∷USH**ingg**

COVER LETTER

TO: Registration Section Division of Corporations

C TO C DESIGNS LLC

SUBJECT: _

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:

Ulli Steiner

Name of Person

Tax Professionals, LLC

Firm/Company

1105 W Maple Ave

Address

Geneva, AL, 36340

City/State and Zip Code

ulli@taxprollc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

■ \$25.00 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)

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

C TO C DESIGNS LLC		20	
	pany as it now appears on our records. I Liability Company)	<u> </u>	
(A Florida Limited	I Liability Company)	· · · · · · · · · · · · · · · · · · ·	
The Articles of Organization for this Limited Liability Compan Florida document number <u>L18000143867</u> .	y were filed on <u>06/11/2018</u>	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
Ocean Blue Staging, LLC			
The new name must be distinguishable and contain the words "Limited Lial	bility 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)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter fl</u>	<u>he name of the new registered</u>	
Name of New Registered Agent:	·····		
New Registered Office Address:			
Enter Florida street address			
	, Florida		
	City	Zip Code	

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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

. .

.

.

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			🗆 Remove
			□Change
			🖸 Add
			Change
			Ū∧dd
			🗅 Change
			🗆 Add
			□ Change
<u> </u>			🗆 Add
			□Change
			🗆 Add
		<u></u>	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

	· · · · · ·	 	
 			<u> </u>
 	• •		<u> </u>
	<u></u>		

(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 (3)(b) <u>Note:</u> 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.

If 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 record is filed.

Dated May 28	2020	
Mp		
	Signature of a member or authorized representative of a member	
Cindy Myers		

Typed or printed name of signee

Tax Professional Services, LLC

A Financial Services Corporation 1105 W Maple Ave Geneva, Al. 36340 334-684-6398 334-684-7193 -fax www.taxprollc.com

Members: National Society of Accountants, National Association of Enrolled Agents, National Society of Tax Professionals, Alabama Association of Accountants, American Society of Problem Solvers

July 2, 2020

FLORIDA DEPARTMENT OF STATE AMENDMENT SECTION DIVISION OF CORPORATIONS P O BOX 6327 TALLAHASSEE, FL. 32314

To whom it may concern,

Enclosed you will find: Articles of Amendment, check for payment and a self addressed & stamped envelope.

Please register the enclosed Articles of Amendment for CTO C DESIGNS, LLC and return to us in self addressed envelope provided Cert#: 7018 0360 0000 7625 3376.

Thank you,

1. Steir

Ulli Steiner Tax Professional Services, LLC

Enc.

Cert#: 7018 0360 0000 7625 3376