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To:	
	Division of Corporations
	Fax Number : (850)617-6383
From:	
	Account Name : REGISTERED AGENTS INC.
	Account Number : I20090000081
	Phone : (307)200-2803
	Fax Number : (855)330-1010
**Enter the e annual	email address for this business entity to be used for future report mailings. Enter only one email address please.**
Email A	ddress:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOLO MIO PHOTOGRAPHY LLC

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ULI Z. ZUIB T. LEWIEUX

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ED OF

Solo Mio Photography LLC	2019 C	CT 28 P 2 93	
(Name of the Limited Liability Com	pany as it now appears of	our records.)	
(Name of the Limited Liability Com (A Florida Limited	d Liability Company) 「人ししみ	hastel, fluida	
The Articles of Organization for this Limited Liability Compar	y were filed on 09/1	7/2018	and assigned
Florida document number L18000220629			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	ability company here	:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the desig	gnation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>		
(Principal office address MUST BE A STREET ADDRESS)			
	· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	pro 1.1	named anton th	o name of the n
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	omce address on o ere:	ur records, <u>enter ti</u>	e name or me n
Name of New Registered Agent:	<del></del>	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter Florido	i street address	
		Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agen			
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple	gree to act in this ca ete performance of m	pacity. I further agree y duties, and I am fan	e to comply with t miliar with and

If Changing Registered Agent, Signature of New Registered Agent

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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

. . . .

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR_	Milagros M Guevara	7901 4th St N	🖸 Add
		STE 300	Remove
		St. Petersburg, FL 33702	□ Change
			☐ Remove
			Change
			Remove
			☐ Change
			□ Remove
			☐ Change
			Add
			□ Remove
			Change
			🗅 Add
			□ Remove
			Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an e Note	tive date, if other than the date of filing:
f the robb Th	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	October 28 2019
	Signature of a member or authorized representative of a member
	Morgan Noble
	Typed or printed name of signee

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