118000242158

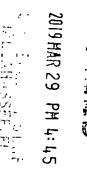
(Re	questor's Name)	
(Ad	dress)	<u> </u>
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	
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C. GOLDEN

APR - 6 2019

COVER LETTER

то:	Registration Se Division of Cor			
0115.15		CREATIVE, LLC		
SUBJE	ECT:	Name of Lim	ited Liability Company	<u></u>
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		ANN MARTINEZ		
			Name of Person	
		CHINOLA CREATIVE, I	J.C	
			Firm/Company	· <u>···</u>
		300 N. KNOWLES AVE. APT. 414		
Address				
		WINTER PARK, FL 3278	39	
		CONTACT@CHINOLAC	City/State and Zip Code REATIVE.COM	
		E-mail address: (to be used for future annual report notific	cation)
For fur	ther information co	oncerning this matter, please ca	all:	
ANN I	MARTINEZ		407 910-5690 at ()	
	Name of	f Person		Telephone Number
-monosi	ed ris a check for th	ne following amount:		
\$25	5.00 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)

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

FILED

2019 MAR 29 PH 4: 45 CHINOLA CREATIVE, 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 10/15/2018 Florida document number L18000242158 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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 =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
АР	JAVIER AGUILU	300 N. KNOWLES AVE.	
		ADT 414	Add
		АРТ. 414	■ Remove
		WINTER PARK, FL 32789	
			Change
			Remove
			Change
			Remove
			☐ Change
			Add
			Remove
			Change
			
			Remove
			Change
			Add
			Remove
			Change

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reffecti <u>te:</u> If	date, if other than the date of filing:
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ted	02/21 . 2019
	m1. = 5

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00