6/13/2019

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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FI OIII.	Account Name :	TAX ZONE INC.			
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Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY JUN 1 4 2019 (Harris (Hess)

COVER LETTER

TO: Registration Section Division of Corporations	
THE HUMBLE ADOBE LLC	
SUBJECT: Name of Lin	nited Liability Company
The enclosed Articles of Amendment and fec(s) are sub	omitted for filing.
Please return all correspondence concerning this matter	to the following:
ED KOTLER	
	Name of Person
TAX ZONE INC	
	Fiint Company
8865 COMMODITY CIR	
	Address
ORLANDO, Ft. 32819	
	City/Sinte and Zip Code
fi-mail nddress:	(to be used for future annual report notification)
For further information concerning this matter, please of	ail:
ED KOTLER	407 888-3131
Name of Person	at () Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
Ø \$25.00 Filing Fee □ \$30.60 Filing Fee &	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee,
Certificate of Status	Contified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tullahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

19 JUN 13 PH II: 17

TALLAMASSEE, FLORIDA

THE HUMBLE ADOBE LLC			
(Name of the Limit	ed Llability Compa (A Florida Limited	ny as it don aniscais on o Linbility Company)	ur eccords.)
The Articles of Organization for this Limited Li Florida document number 1.18000271854		were filed on 11/26/20	18 and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited lat	ollty company here:	
CREATIVE ABODE LLC	ĺ		
The new name must be distinguishable and contain the w	ords "Limited Linb	lity Company," the designs	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	114 EAST ESTHER	ST
(Principal office address MUST BE A STREE	J	ORLANDO, FL 3280	06
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)	114 EAST ESTRER ORLANDO, FL 3280	
B. If amending the registered agent and registered agent and/or the new registered of			records, enter the name of the new
Name of New Registered Agent:			
New Registered Office Address:	114 BAST ES	THER ST	
	1	Emer Piortaa ti	
	ORLANDO	City	, Florida 32806 Zip Code
		·	Zip Code
New Registered Agent's Signature, if changing	1		
I hereby accept the appointment as registere	ed agent and ag	ree to act in this capa	city. I further agree to comply with the

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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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