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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

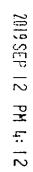
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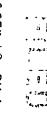


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## **COVER LETTER**

Division of Corpo	rations		
SUBJECT: LVCK	Y FRAME PO	20 Suction 5 CCC	
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	JORGE	LAUOY Name of Person	
		Firm/Company	
	700 SW 4	2 NO Blue Apt 2 Address	<u>a</u>
	Cainesuille,	PL 32407 City/State and Zin Code	<del></del>
	In to @ NExt E-mail address: (1	City/State and Zip Code  ART PROSECT ORG to be used for future annual report notific	cation)
For further information con-	cerning this matter, please ca	all:	
JORGE	LAUDY	at ( <u>305</u> ) <u>857 Z</u> Area Code Daytime	324
Name of Pe	erson	Area Code Daytime	Felephone Number
Enclosed is a check for the f	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)

#### MAILING ADDRESS:

TO:

**Registration Section** 

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

(Name of the Limited Liability Comp (A Florida Limited	UCTIONS	LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears of Liability Company)	n our records.)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L 1900030787</u> .		1/30/201	9 and ass	signed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lial	bility company here	*		_
NEXT ART PROJECT LLC				,
NEXT ART PROJECT LLC  The new name must be distinguishable and contain the words "Limited Liab	oility Company," the desig	gnation "LLC" or the abl	breviation "L.	L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
			13 SEP	
				: 184.9
Enter new mailing address, if applicable:			· ¬p	111
(Mailing address MAY BE A POST OFFICE BOX)		. , , , , , , , , , , , , , , , , , , ,		
-		1	-12 -178	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	office address on or re:	ur records, <u>enter</u>	the name	of the ne
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 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 = Ma $AMBR = Au$	inager ithorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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lf an effec <b>Note:</b> If	e date, if other the tive date is listed, the of the date inserted in it's effective date or	date must be speci this block does	fic and cannot be pr not meet the app	licable statutory	or more than 90 days a	ptional) after filing.) Pursuant this date will not b	to 605.0207 e listed as
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Page 3 of 3

Filing Fee: \$25.00