

L190000 51988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

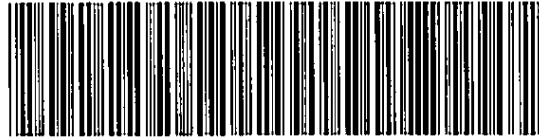
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/18/19--01032--011 \*\*55.00

FILED  
19 OCT 21 AM 2:30  
TALLAHASSEE, FLORIDA

OCT 21 2019  
S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 30, 2019

NORMAN SOLEY  
INKY FINGERS PRINTING LLC  
2840 SOMERSET DRIVE APT 306M  
LAUDERDALE LAKES, FL 33311

SUBJECT: INKY FINGERS PRINTING "LLC"  
Ref. Number: L19000051988

We have received your document for INKY FINGERS PRINTING "LLC" and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PAGE 2 IS MISSING

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 819A00020098

2019 OCT 21 PM 12:05

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Inky Fingers Printing LLC  
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:

Norman Soley  
Name of Person

Inky Fingers Printing LLC  
Firm/Company

2840 Somerset Dr. APT 306M  
Address

Lauderdale Lakes, FL 33311  
City/State and Zip Code

Inky Prints@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Norman Soley at 954 410-6073  
Name of Person Area Code Daytime Telephone Number

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)

**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**

Inky Fingers Printing LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
19 OCT 21 AM 2:31  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/21/2019 and assigned  
Florida document number L19000051988.

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*

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Norman Solay	2840 Somerset Drive	<input type="checkbox"/> Add
	(change 70% ownership)	M 306, Lauderdale Lakes	<input type="checkbox"/> Remove
	<del>RMGR</del>	33311, FI	<input type="checkbox"/> Change
AMBR	Roryana McDonald	2840 Somerset Drive	<input type="checkbox"/> Add
	(change 30% ownership)	M 306, Lauderdale Lakes	<input type="checkbox"/> Remove
	<del>RMGR</del>	33311, FI	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Registered Agent McDonald, Roryann @  
2840 Somerset Dr. APT M306 Lauderdale Lakes  
FL 33311 is now ~~30%~~ 70% owner. ~~and~~  
Roryann McDonald x ~~RMP~~  
And,  
Registered Agent Soley, Norman @ same  
address is now ~~70%~~ 70% owner.  
Norman Soley x ~~NS~~

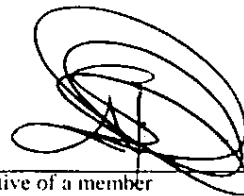
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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)

**Note:** 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 September, 11, 2019.



Signature of a member or authorized representative of a member

Norman Soley

Typed or printed name of signee