

L 19000053775

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

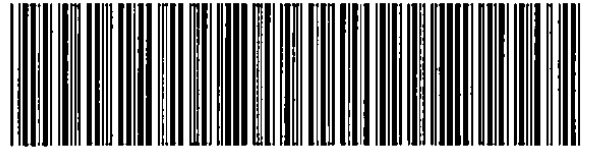
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800331384498

07/05/19--01002--029 **25.00

FILED
19 JUL 29 AM 9:44
STATE OF CALIFORNIA
FALLS CHURCH, VIRGINIA

JUL 30 2019

T SCHROEDER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ashley Santana Photography, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sarah-Ashley Santana
Name of Person

Ashley Santana Photography, LLC
Firm/Company

13504 White Crane Place
Address

Estero, FL 33928
City/State and Zip Code

ashleysantanaphotography@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sarah-Ashley Santana at (954) 854-2153
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

already sent

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Asnley Santana Photography, 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 Feb. 25, 2019 and assigned Florida document number L1900053775

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

FILED
19 JUL 29 AM 9 44
STATE OF FLORIDA
TALLAHASSEE

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

19 JUL 23 AM 9:44
SLIPSTREAM
FALL HARBOR, FLORIDA

FILED
19 JUL 29 AM 9:44
SEVEN OAKS ROAD
TALLAHASSEE, FLORIDA

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.

Dated July 22, 2019

Sarah Ashley Sutton
Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Sarah Ashley Santana
Typed & printed name of signee

Typed & printed name of signer