## L19000061969

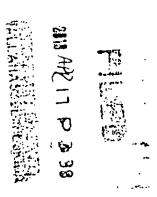
(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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APR 24 2023 T. LETZIEUX

## **COVER LETTER**

TO: Registration Se Division of Cor			•
SUBJECT: A&	Mame of Lim	ng and design item item item item item item item item	LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Neana S.C	Name of Person	
		Firm/Company	
	6271 Burave	nture Court SA	rasota, FL 34243
		Address	
	Neary_Chan@	YAhw. Com	
	E-mail address: (	to be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca	alt:	
Neang	<u>Chan</u> f Person	at (941) 3)6 Three Code Daytime	9766 Telephone Number
Enclosed is a check for the	ne 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)
MAIL	ING ADDRESS:	STREET/COURII	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

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 Company as it now appears on our records.)  (A Florida Limited Liability Company)	DesignLLC
rticles of Organization for this Limited Liability Company were filed on	and assigned
a document number	

## 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

Zip Code

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 **Type of Action** Title Name Neang S. Chan ☐ Remove MGR Aaron L. Mizzell 6271 Borowenture CTO Add Sarasota, FL 34243 \_ Remove ☐ Change ☐ Add ☐ Remove □ Add □ Remove □ Change □ Add □ Remove ☐ Change ☐ Remove \_\_\_\_\_ Change

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ian ciico <u>Note:</u> I	re date, if other than the date of filing: 4/15/2019 (optional) ctive 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated _	4/15/2019
	Signature of amember or applicative of a member

Page 3 of 3

Filing Fee: \$25.00