L1900078152

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer	

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JAN 0 9 2020 S. YOUNG

COVER LETTER

TO: Registration Division of	n Section Corporations		
	IC HOMES LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	s of Amendment and fee(s) are sul	bmitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	LAYLA ORTEGA		
		Name of Person	
	STAGING DOCTOR LL	С	
	***	Firm/Company	
	5251 NE 26TH AVE		
		Address	
	Fort Lauderdale, FL 3330	8	
		City/State and Zip Code	-
	drlaylamay@gmail.com		
		(to be used for future annual report no	tification)
For further information	on concerning this matter, please of	call:	
LAYLA ORTEGA		954 510-5123 at ()	
Nan	ne of Person		ne Telephone Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	c ☐ \$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 Add		Street Address:	ection
Registration of Division of Control of Control	on Section f Corporations	Registration Se Division of Co	
P.O. Box 6	5327	The Centre of	•
Tallahasse	c, FL 32314	2415 N. Monro	pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.)	
he Articles of Organization for this Limited Liability Company	were filed on 3/20/2019	and assigned
lorida document number L19000078152		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
STAGING DOCTOR LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	المستنب والأوابد والأراب
Enter new principal offices address, if applicable:	5251 NE 26TH AVE	
Principal office address MUST BE A STREET ADDRESS)	Fort Lauderdale, FL 33308	四 第 日
		i h
inter new mailing address, if applicable:	5251 NE 26TH AVE	
Mailing address MAY BE A POST OFFICE BOX)	Fort Lauderdale, FL 33308	€; %
Therefore was to the second se		<u> </u>
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter th	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	1-00-00	
	Enter Florida street address	
	, Flori	ida Zip Code
	City	r.tp 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>	Address	Type of Action
			□Add
			□ Remove
			[]Change
			□ Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐Change

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Effec If an ef	tive date, if other than the date of filing: (optional) fective 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 (
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it
Note:	ment's effective date on the Department of State's records.
Note:	2 stratus a case on the population of that is recorded.
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Note: docum ne re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
Note: docur ne re The	cord 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.
Note: docur ne re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 2014 day after the record is filed.
Note: docum he re	cord 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. NOVEMBER 20 2019
Note: docur ne re The	cord 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.

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Filing Fee: \$25.00