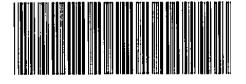
119000 109980

(Re	questor's Name)	
(Ad	dress)	
<i>(</i> -,	. ,	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



1003343369

TALLAHROOM



COVER LETTER

Progressive SUBJECT:	e Designs LLC					
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	Christopher M Edwards					
	Name of Person					
	Progressive Designs LLC					
	Firm/Company					
	77 Woodview Dr					
	Address					
	Port Orange, FL, 32129					
	energy120v@gmail.com	City/State and Zip Code				
Dan Gambar in Comment		to be used for future annual report noti	lication)			
ror further information (concerning this matter, please c	BII;				
Christopher Edwards		386 3151539 at ()				
Name of Person		Area Code Daytim	e Telephone Number			
Enclosed is a check for t	he 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 St. Certified Copy (additional copy is c			
M 4 11	INC ADDRESS	CER PROPERCION IN	WB ADDRECO			

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

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

TO ARTICLES OF ORGANIZATION OF

Progressive Designs 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 _____ Florida document number L19000109980 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 abbrev 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _. Florida j Cin

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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiaccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if the being filed to merely reflect a change in the registered office address, I hereby confirm that the limited company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registe

or removed from our records:

 $MGR \stackrel{\cdot}{=} Manager$

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address
AMBR	Dennis O'neal	521 6th Street, Holly Hill, FL, 32117
	Mark S Edwardds	
AP		
		77 Woodview Dr. Port Orange, FL, 32129
		

•					
					
	· -	<u></u>			
					
,					
					······································
(If an ef <u>Note:</u>	tive date, if other than Tective date is listed, the dat If the date inserted in the nent's effective date on t	e must be specific and his block does not n	l cannot be prior to date oneet the applicable sta	of filing or more than 90 day	(optional) ys after filing.) Pursi ts, this date will n
If the re (b) The	cord specifies a dela 90th day after the	ayed effective of record is filed.	late, but not an e	ffective time, at 12	:01 a.m. on th
Dated	September 15		2019		
	three Es	lward		presentative of a member	
		Signature of a r	nember or authorized re	presentative of a member	
	Chris Edwards				
			Typed or printed name	of signas	

Page 3 of 3

Filing Fee: \$25.00