# 119000120709

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### **COVER LETTER**

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

Ashwin Creative IIc Name Change SUBJECT: \_ 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: Edward S Hand Jr Name of Person Firm/Company 54082 Marlee Road Address Callahan, Florida 32011 City/State and Zip Code E-mail address; (to be used for future annual report notification) For further information concerning this matter, please call: Edward S Hand Jr 904 378,6904 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **\$25.00** Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

# TO ARTICLES OF ORGANIZATION OF

Ashwin Creative IIc (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and as Florida document number \_\_\_\_\_\_L19000120709 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 2020CFS He The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "I 54082 Marlee Road Enter new principal offices address, if applicable: 9 Callahan Florida 32011 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BQX) B. If amending the registered agent and/or registered office address on our records, enter the name 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

#### 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 comprovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar was accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this doc 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 Age

or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type
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	23, September 2019
	ate, if other than the date of filing: (optional) 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 6
	e date inserted in this block does not meet the applicable statutory filing requirements, this date will not be li
	effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear
(p) The 900	h day after the record is filed.
23.5	eptember 2019
Dated _	
	$t_0/2$
	Signature of a member or authorized representative of a member
	Edward S Hand Jr
-	Typed or printed name of signee

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Filing Fee: \$25.00