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Amend

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COVER LETTER

	legistration Sec Pivision of Corp		-	
SUBJECT	r: <u>D.K</u>	Modern Decore Name of Lim	ealm LLC ited Liability Company	
The enclos	sed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please reti	ırn all correspor	ndence concerning this matter	to the following:	
		Liaco	Poitonico Name of Person	
		N.C.	Modern Decored	mLLC
		1680 V	Michigan Ave Suit	<u>(200 1730</u> 4
			Brack, FL, 3313 City/State and Zip Code	
		E-mail address: (t	FOO NEMODEL . LO to be used for future annual report notif	ication)
For further	information co	incerning this matter, please ca	ali:	
Kiac	A Poite V	Person	at (<u>4+5)</u> <u>837 -</u> Area Code Daytimo	3531 Telephone Number
Enclosed i	s a check for the	e following amount:		
ਭ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Co (A Florida Lim	M LLC	irs on our records	
(A Florida Lim	ited Liability Company)	ars on our records.	
The Articles of Organization for this Limited Liability Comp	pany were filed on _	08/20/20	۱ <u>۹</u> and assigned
Florida document number <u>L19000 a1 a053</u> .		,	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company h	<u>iere</u> :	
The new name must be distinguishable and contain the words "Limited I	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	<u> </u>		
Enter new mailing address, if applicable:			· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	-		<u></u>
		<u>-</u> .	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	d office address or <u>here</u> :	n our records, <u>ent</u> e	
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:			
	Enter Flo	orida street address	
	·····	, Florida	
N D 14 14 15 16 17 17 17 17 17 17 17 17 17 17 17 17 17	City		Zip Code
New Registered Agent's Signature, if changing Registered Ag	<u>ent:</u>		

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
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(If an eff	ive date, if other than the date of filing:
the red) 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.
Dated	September 24. 2019.
	Signature of a friember or authorized representative of a member
	Mindliff of a member or authorized connecontation of a member