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1 JUNISION OF CORPORATIONS

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Amendment of Limited Liability Company 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:
Christin Neisler Name of Person
Chirotin Marie Publications LLC
2253 Ringling Blvd
Savas Vta, IL 34257 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christon Voisier at 707 442-7760 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\Bigcup \text{\$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$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

Christin Marie Publications LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ED 30 DA M
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Enter new mailing address, if applicable:	节 第7
	<u>→ 200</u>
(Principal office address MUST BE A STREET ADDRESS)	
Enter new principal offices address, if applicable:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "I	on "L.L.C."

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
MBA	Christin Neisler		2253 Ringling Blvd Savasota Ft 34237	12 Add
				🗆 Remove
				Change
		. !	1.1 % 1.1 %	🗆 Add
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D. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effecti Note: If t	date, if other than the date of filing: September 26, 20 9 (optional) we 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 (3)(he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 's effective date on the Department of State's records.
If the recor (b) The 90	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: oth day after the record is filed.
Dated	Signature of a member or authorized representative of a member
	Christin Neisler Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00