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2019 WOV 22 FH I2: YOU
SECRET TO BE A COMMENT.

COVER LETTER

TO:	Registration Se Division of Cor						
cub ie		esignz For You, LLC					
SUBJE	UI;	Name of Lim	ited Liability Company				
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	eturn all correspo	ondence concerning this matter	to the following:				
		Angela Johnson					
			Name of Person				
		Creative Designz For You,	LLC				
			Firm/Company				
		290 Citrus Tower Blvd, St	e 231				
			Address				
		Clermont, FL 34711					
		City/State and Zip Code creativedesignz4u@outlook.com					
		E-mail address: (to be used for future annual report notif	ication)			
For furtl	ner information c	concerning this matter, please co	all:				
Barney	Johnson		352 2174581				
	Name o	of Person	at ()	: Telephone Number			
Enclose	d is a check for the	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 Status & Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

TO:

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

Creative Designz For You, LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	
he Articles of Organization for this Limited Liability Compa	any were filed on October 28,2019	and assigned
Florida document number L19000269005		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the a	obreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS		
Inter new mailing address, if applicable:		Z: <u>~</u> 23
Mailing address MAY BE A POST OFFICE BOX)		- 5
		00 TT
		· 10 1
If amending the registered agent and/or registered egistered agent and/or the new registered office address between the control of the con		the name of the i
egistered agent andor the new registered office address i	ici c.	Ci Ci
Name of New Registered Agent:	 ;;	:: <u>6</u>
New Registered Office Address:	Enter Florida street address	
	, Florida Citv	Zip 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>	<u>Address</u>	Type of Action
MGR	Brittney Rachel	1616 Myrtle Lake Ave Fruitland Park, FL 34731	■ Add
			□ Remove
			Change
			□ Add
			Remove
			Change
			Add
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Effective data if other than	the date of fili	no·		(0	ntional)	
Effective date, if other than If an effective date is listed, the date	must be specific a	nd cannot be prior	to date of filing or	more than 90 days	after filing.) Pursuant	to 605.0207
Note: If the date inserted in the	s block does not	meet the applic	able statutory fili	ng requirements,	this date will not b	e listed as
document's effective date on the	e Department of	state's records				
ne record specifies a dela The 90th day after the			t an effective	time, at 12:0	1 a.m. on the	earlier of
The 30th day after the	record is filed	٠,				
Dated November 18th		2019				
Dated		2019	 -			
(1	1_ =		_			
				ve of a member		<u></u>

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Typed or printed name of signee

Filing Fee: \$25.00