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(Reque	estor's Name)	
(Addre	ss)	
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(City/S	tate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busine	ess Entity Name)	
(Docur	nent Number)	
Certified Copies	Certificates of	Status
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2019 DEC 12 PM 6: 39
SECRETARY OF STATE

SNOMMIZ ~

SUBJECT:				
	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Christian Michelle Homn	nes		
	-	Name of Person		
	Omni ScreenWorks LLC			
		Firm/Company		
	207 East Holly Drive			
	· · · · · · · · · · · · · · · · · · ·	Address		
	Orange City, FL 32763			
		City/State and Zip Code		<del></del> -
	omniscreenworkslte@gma E-mail address: (	to be used for future annual r	eport notification)	
For further information c	oncerning this matter, please c		-	
Christian Michelle Hon			7-4851	
Name	f Person	at () Area Code	D 20 A. ale	N
name o	i Person	Area Code	Daytime Telepho	one Number
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
<u>Mailing Addres</u> Registration S		Street Ad	dress: tion Section	
Division of C			non Section Forporatio	ons

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

**Division of Corporations** 

Omni ScreenWorks LLC

TO:

## TO ARTICLES OF ORGANIZATION OF

Omni ScreenWorks LLC

(Name of the Limited	Liability Company a Florida Limited Liabi	it now appear ity Company)	s on our records.)		<u> </u>
The Articles of Organization for this Limited Liab Florida document number		e filed on	ovember 26, 2019	a	nd assigned
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of th	he limited liability	company ho	e <u>re</u> :		
The new name must be distinguishable and contain the word	ds "Limited Liability C	ompany," the d	esignation "LLC" o	r the abbreviat	ion "L.L.C."
Enter new principal offices address, if applicab	le: _				
(Principal office address MUST BE A STREET)	<u>ADDRESS)</u>		-		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BO					<del>-</del>
muning dauress MAT DEAT OUT THE DO			<u>.</u>		
B. If amending the registered agent and/or registered and/or the new registered office address because of New Registered Agent:		ess on our r	ecords, <u>enter th</u>	e name of th	-N
New Registered Office Address:				<u> </u>	De 100
		Enter Flor	ida street address	ETA	C
-		City	Flo <b>ri</b>		Code M
New Registered Agent's Signature, if changing Reg		Çi,		13.00 C	<u> </u>
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registe, being filed to merely reflect a change in the registery company has been notified in writing of this change in the registery.	and complete per red agent as prov zistered office ada	formance of ided for in C	my duties, and Chapter 605, F.S	l am fahiltid 8. Or, if this	ur with and document i
	H Changing	Registered Ag	ent, Signature of N	ew Registered	Agent

## or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Christian Michelle Hommes	207 East Holly Drive Orange City, FL 32763	≣∧dd
			□Remove
			□Change
			□Add
		TALLAHASSEE	DEC Change
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Tective date, if other than the dat	te of filing:specific and cannot be prior to date of f	(optional) (filing or more than 90 days after filing.) Pursu	eant to 605.020
an effective date is listed, the date must be	The second secon	tory filing requirements, this date will r	not be listed as
on effective date is listed, the date must be ote: If the date inserted in this block			
on effective date is listed, the date must be ote: If the date inserted in this block			
in effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Departecord specifies a delayed effective date.	tment of State's records.	:01 a.m. on the earlier of: (b) The 90th	ı day after the
an effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Department specifies a delayed effective date is filed.  December 6	tment of State's records.  Ite, but not an effective time, at 12:	:01 a.m. on the earlier of: (b) The 90th	i day after the
an effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Departure of specifies a delayed effective date is filed.	tment of State's records.  Ite, but not an effective time, at 12:	:01 a.m. on the earlier of: (b) The 90th	i day after the
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