2/19/2020

Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:_		
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KEY LIME PHOTOGRAPHY LLC

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FEB 20 2020

To: Page 9 of 6

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CUD LEGT.		PHOTOGRAPHY LLC			
SUBJECT:		Name of Limi	ited Liability Company		
The enclosed	J Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Cheyenne Moseley			
			Nume of Person		
		Legalzoom.com, Inc.			
		·	Firm/Company		
		101 N Brand Blvd 11th Fl			
		<u></u>	Address		
		Glendale, CA 91203			
			City/State and Zip Code		
,		keylimephotos@gmail.com			
		E-mail address: (	to be used for future annual re	port notineation)	
For further i	nformation c	oncerning this matter, please ca	all:		
Cheyenne N	Aoseley		800 773-	-0888	
	Name o	f Person	Area Code	Daytime Telephone Number	
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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

KEY LIME PHOTOGRAPHY LLC		
(Name of the Limited	A Linbility Company as it now appears on our records A Florida Limited Liability Company)	2020 SEC
The Articles of Organization for this Limited Lia	bility Company were filed on 12/10/2019	Z Fand Wigned
Florida document number L19000300779	·	
This amendment is submitted to amend the follow	wing:	PH D
A. If amending name, enter the new name of t	the limited liability company here:	PH 12: 24
Conch Republic Photography, LLC		. * i
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation "LLC"	or the abbreviation "E.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/o registered agent and/or the new registered off	er registered office address on our records ice address here:	, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Floridu street addres:	•
		orida
	City	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 = M AMBR = A	anager uthorized Member		
Title	Name	<u>Address</u>	Type of Action
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			Remove
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