## L20000017025

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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AUG 31 2020 S. YOUNG

## **COVER LETTER**

TO:

Tallahassee, FL 32314

Creative B	uilds LLC		
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:	
	Chandler Williams		
		Name of Person	
	Creative Builds LLC	Name of Limited Liability Company  ment and fee(s) are submitted for filing.  concerning this matter to the following:  ndler Williams  Name of Person  ative Builds LLC  Firm/Company  Wyckliffe Pl  Address  er Springs FL 32708  City/State and Zip Code  dler@Blueprintgroups.com  E-mail address: (to be used for future annual report notification)  g this matter, please call:  at (	
	Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:    Chandler Williams		
	Winter Springs FL 32708	3	
	· -	os.com	otification)
For further information c	oncerning this matter, please co	all:	
Chandler Williams			
Name o	f Person	Area Code Dayti	ime Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Addres			
_			
P.O. Box 632	•	The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Creative Builds LLC		262
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records da Limited Liability Company)	9
The Articles of Organization for this Limited Liability	Company were filed on 01/09/2020	~> and assigned
Florida document number L20000017025		3
This amendment is submitted to amend the following:		7:21
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD		or the abbreviation "L.L.C."
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		he name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<del>.</del>
	, Flo	rida 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 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
	<del></del>		□Add
			□Remove
			□Change
<del></del>		<del></del>	🗆 Add
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			□ Add
			□Remove
			□Change
			□Add
			□Remove
			Change

needing to amend percent	age to Zachary Huebne	er 51% owner and Ch	andler Williams 49% owner	ŗ.
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ective date, if other than the	date of filing:		(optional)	
effective date is listed, the date mute: If the date inserted in this b	st be specific and cannot be p	rior to date of filing or mo	re than 90 days after filing.) Pursu	ant to 605.020
cument's effective date on the D			requirements, this date will he	л be usieu i
cord specifies a delayed effectives filed.	e date, but not an effectiv	re time, at 12:01 a.m. of	the earlier of: (b) The 90th	day after th
July 8th	2020			
eu	·	•		

Typed or printed name of signee