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(Req	uestor's Name)	
(Addi	ess)	
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PICK-UP	☐ WAIT	MAIL
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(Docu	ument Number)	.
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	





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09/29/20--01011--008 ++25.00



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LURING DESIGN LLC			
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our reco ited Liability Company)	rds.)	
The Articles of Organization for this Limited Liability Comp	pany were filed on 1/29/2020	and as	signed
			Ū
lorida document number 1.20000036447			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
The new name must be distinguishable and contain the words "Limited I	.iability Company," the designation "L	LC" or the abbreviation "	"I"C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS	S)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
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 If amending the registered agent and/or registered off agent and/or the new registered office address here: 	nce address on our records, <u>ent</u>		wiregisc
gent and/or the new registered office address here.			
			-
Name of New Registered Agent:		W 45	
		,	
New Registered Office Address:			
	Enter Florida street add	ress	
		Florida	
	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 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
AMGR	MENATALLAABDELHAMID	12993 MALLORY CIR	
		ORLANDO, FL 32828	≅Remove
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Flective date, if other than the date of filing: (optional) (optional) (an effective 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. (beg. If the date inserted in this block does not never the applicable statutory filing requirements, this date will not be listed as 1 occurrent's effective date on the Department of State's records. (record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the is filed. (SEPTEMBER 23 2020 Signature of a member or authorized representative of a member MAJED TARIQ SHATAT		.=			_
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Filing Fee: \$25.00