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MAR 12 2021 S. YOUNG



COVER LETTER

TO: Registration Section Division of Corporations						
	N DESING & ACADEMY LLC	· · · · · · · · · · · · · · · · · · ·				
SUBJECT:	Name of Lim	ited Liability Company	.			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	GLORIA R GUTIERRE	EZ.				
		Name of Person				
	FASHION DESING & AC	CADEMY LLC				
	Firm/Company					
	4040 W WATERS AVE SUITE 210					
	~ 	Address				
	TAMPA, FL 33614					
		City/State and Zip Code	 			
	TAMPAMULTISERVICES					
		to be used for future annual report noti	fication)			
For further information	concerning this matter, please c	all:				
GLORIA R GUTIERRI	EZ	813 410-2920 at ()				
Name of Person		Area Code Daytim	e Telephone Number			
Enclosed is a check for t	the following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addre Registration Division of O P.O. Box 63: Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Cou The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

33.

FASHION DESING & ACADEMY	LLC		
(Name of the Limited	Liability Compa Florida Limited	ny as it now appears on our records.) Ciability Company)	28
The Articles of Organization for this Limited Lia	bility Company	were filed on 05/14/2020	and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
FASHION DESIGN & ACADEMY LLC			
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		4040 W WATERS AVE STE 210)
		TAMPA, FL 33614	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4040 W WATERS AVE STE 210	
		TAMPA, FL 33614	
B. If amending the registered agent and/or re agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:		address on our records, enter the	e name of the new registered
		, Flori	
		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>	Address	Type of Action
			□ Add
			□Remove
			Change
			□Remove
			□Change
			□Remove
			🗀 Add
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
			□Add
			□Remove
			□ Changa

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A E. Effective date, if other than the date of filing:

(If 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the 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 record is filed. JANUARY 2021 Signature of a member or authorized representative of a member GLORIA R GUTIERREZ Typed or printed name of signee