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To:

Division of Corporations

Fax Number : (850)617-6383

From:

::

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : 120070000020 Phone : (813)435-3176 Fax Number : (813)333-6358

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

CAMEKESA HILLS, LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CAMEKESA HILLS, LLC			
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears оп our records.) liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L20000236102	were filed on 08/05/2020	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
ELEGANT ELEMENTS, LLC			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2161 County Road 540A, #108,		
(Principal office address MUST BE A STREET ADDRESS)	Lakeland, Florida 33813		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	2161 County Road 540A, #108, Lakeland, Florida 33813		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, enter the nai	20 HAR 25 AH 8:	
	Florida	28	
	City , Florida _	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

Title	Name	Address	Type of Action
MGR	NICKOLAS SPRADLIN	18801 N. DALE MABRY HWY STE 119	
		LUTZ, FL 33548	■Remove
			□ Change
AMBR	ALIYANA T. GORDON	2161 County Road 540A, #108,	🖹 Add
		Lakeland, Florida 338`3	🗀 Remove
			□Change
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Note: If the date inscrted in the	e must be specific and cannot be prior to da	(optional) te of filing or more than 90 days after filing.) Pursuan statutory filing requirements, this date will not	
record specifies a delayed eff d is filed.	ective date, but not an effective time, a	at 12:01 a.m. on the earlier of: (b) The 90th d	ay after the
03/25 Dated	2022		
21			

Filing Fee: \$25.00

Typed or printed name of signee