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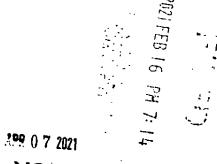
(Re	equestor's Name)	
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S. YOUNG

COVER LETTER

Registration Section
Division of Corporations

TO:

City Graph SUBJECT:	ics & Designs	·	w.e.	
	Name of Lim	aited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
	ondence concerning this matter	·		
	Tonyia Bennett			
		Name of Person		
	City Graphics and Designs	;		
		Firm/Company		
	55214 White Chicory			
		Address		
	Apollo Beach Florida 335'	72		
		City/State and Zip Code		
	citygraphicsndesigns@gma	il.com		
	E-mail address: (to be used for future annual report not	tification)	
For further information of	oncerning this matter, please c	all:		
Tonyia Bennett		305 975-6460 at ()		
Name o	f Person		ne Telephone Number	
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	
Mailing Addres Registration		Street Address: Registration Se	ection	
Division of Corporations		_	Division of Corporations	
P.O. Box 632		The Centre of	Tallahassee	
Tallahassee.	ation Section Registration Section n of Corporations Division of Corporations			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

City Graphics and Designs LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on September 2, 2020 Florida document number $\frac{1.20000273614}{1.0000273614}$ This 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 Liability Company," the designation "LLC" or the abbreviation "LLC." 5214 White Chicory Drive Enter new principal offices address, if applicable: Apollo Beach, FL 33572 (Principal office address MUST BE A STREET ADDRESS) 5214 White Chicory Drive Enter new mailing address, if applicable: Apollo Beach, FL 33572 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Manager	Tonyia Bennett	5214 White Chicory Drive	Dixidd
		Apolo Beach, Fl. 33572	□Remove
			Change
			□ Add
			□Remove
			□Add
			Remove
			☐ Change
			□Add
			Remove
			□Change
			□ Add
			Remove
			□Change
			□Remove
			□ Change

	Change of Address OLD - 10700 99 M Place Semindy The 33770 our 5214 White Chicago Drive, Apollo Beach Fe 33	
	OW - 10700 99th Place Semindy The 33770	ス
<u>/></u>	w. 5214 White Chicag Drive Apollo Beach Fe 33	35 1
4	Idd Hember Marager	
	Tony ia Bernett	
l' (Factiva	data if other than the data of filippy. October 17th, 2020	
If an effecti	date, if other than the date of filing:	
document	's effective date on the Department of State's records.	
ie record si	pecifies a delayed effective date, but not in effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	
ord is filed.		
Jan Dated	nuary, 13, 2021	
Dated		
	Signature of a member or authorized representative of a member	
	· · · · · · · · · · · · · · · · · · ·	
	Tonyia Bennett	

Filing Fee: \$25.00