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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Email Address:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WHY NOT GEEK, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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Help



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Why Not Geek, LLC		
( <u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company w		and assigned
The Articles of Organization for this Limited Claubility Company w	ere rifed on	and assigned
Florida document number L20000275495		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
Crafty Geek Creations, LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		·
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	dress on our records, enter the na	me of the new registere
	<b>;</b>	<i>*</i> 2-5-2
N CNI Danisaanad Austra		2021
Name of New Registered Agent:		3.4 8
New Registered Office Address:		
	Enter Florida street address	8 PI
	, Florida _	
	City	Zip Code.
New Registered Agent's Signature, if changing Registered Agent:		3.1 3.1 3.1 3.1 3.1 3.1 3.1 3.1 3.1 3.1

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>	Name	Address	Type of Action
			□Add
			Remove
			☐Change
			□Add
			□Remove
			□Change
			□Remove
			Change
-			□ Add
		□Remove	
			□Change
	Milis		□Add
			□Remove
			□ Change
			□Add
			□Remove
			☐Change

Effective date, if other than the date of filing:	Note: If the date inserted in this block document's effective date on the Depa	does not meet the applica	ble statutory filing requ	irements, this date will	not be listed as t
	(If an effective date is listed, the date must be	specific and cannot be prior t	o date of filing or more tha	n 90 days after filing.) Pur	Suant to 605.0207 (
				<u></u>	
				<del></del>	

Filing Fee: \$25.00