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COVER LETTER

TO: Registration Se Division of Cor		
SHRJFCT:	TELLA FINE	ART LLC ited Liability Company
	Name of Limi	ited Liability Company
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.
Please return all correspo	endence concerning this matter	to the following:
	Lee	B. Gordon, Esq. Name of Person
	Lec	B. Gordon, J.A. Firm/Company
		Bradley Place #211
		, tunes
		alm Acach FL 334 fo City/State and Zip Code - BG 2000 @ aol. com- to be used for future annual report notification)
For further information c	oncerning this matter, please ca	to be used for future minute report notification,
Lee	B. Gordon	at (561) 833 - 2233 Area Code Daytime Telephone Number
name o	i Person	Area Code Daytime 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 & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C	Section	Street Address: Registration Section Division of Corporations
P.O. Box 632 Tallahassee, I	27	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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." Enter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address MUST BE A STREET ADDRESS Enter new mailing address of applicable: Mailing address MAY BE A PONT 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: Emer Florida street address Emer Florida street address Florida		NE ART, L		
The Articles of Organization for this Limited Liability Company were filed on 3 17 2.02 and assigned clorida document number	(Name of the Limited Liability Cor (A Florida Limi	mpany as it now appears of ted Liability Company)	n our records.)	
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:	The Articles of Organization for this Limited Liability Compa	any were filed on3		and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOS) 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 defice address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida street address Enter Florida street address City Sew Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all stanutes 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.	This amendment is submitted to amend the following:			
Enter new principal office 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 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 Enter Florida attreet address Enter Florida attreet address I Special City Sew Registered Agent's Signature, if changing Registered Agent: Thereby 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.	A. If amending name, enter the new name of the limited l	liability company here	:	
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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:

MGK =	Manager	
AMBR =	Authorized Member	

<u>Title</u>	<u>Name</u>			Type of Action
AMBR	Sally	Taglialatella	Palm Beach, FL 33480	_ MAdd
	O	•	Palm Beach, FL 33460	_ □Remove
				_ Change
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Filing Fee: \$25.00