L21000215990

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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration : Division of C		•	•
	IOUS BUSTER PHOTOGRAPI	IY LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fec(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	ANGIE V. GARCIA ARA	QUE	
		Name of Person	
		Firm/Company	
	5665 NW 106TH WAY		
		Address	
	CORAL SPRINGS, FL 33	076	
		City/State and Zip Code	
		OTOGRAPHY@GMAIL.COM	
	E-mail address: (to be used for future annual report notifica	tion) SE
For further information	concerning this matter, please co	all:	ARE ALE
ANGIE V. GARCIA A	ARAQUE	954 867-6860	elephone Number
Name	e of Person		clephone Number 500
Enclosed is a check for	the following amount:		FEE TO
■ \$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 Add Registration Division of P.O. Box 61	r Section Corporations	Street Address: Registration Section Division of Corpo The Centre of Tall	rations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INGLORIOUS BUSTER PHOTOGRAPHY LLC		
(<u>Name of the Limited Liability Cor</u> (A Florida Limit	npany as it now appears on our reco led Liability Company)	ords.)
The Articles of Organization for this Limited Liability Compa	any were filed on $MAY 10, 2021$	and assigned
Florida document number 1.21000215990		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited L.	iability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u></u>	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		ALLAHASSEE, FLE
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here:	ce address on our records, <u>ent</u>	er the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		<u> </u>
	Enter Florida street add.	ress
	,	Florida
	Cuy	zap Coac

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
AMBR	ANGIE V. GARCIA ARAQUE	3657 NW 35TH STREET	Add
		COCONUT CREEK, FL 33066	□Remove
			Change
PRE	MOHAMMAD RASHID	5665 NW 106TH WAY	
		CORAL SPRINGS, FL 33076	■Remove
			□Change
			ZOZZ AUGI 9 SECRETARY
			LAHASS
			AUGI 9 RM 4: 48
			□Remove
			□ Change
			□Add
		<u></u>	□Remove
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ocument's effective date on the De	partment of	State's record	ls.					
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