## 121000238292

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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## **COVER LETTER**

TO:

TO: Registration So Division of Cor			
Durant Des			
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Wendie Durant		
		Name of Person	<del></del>
	Durant Designs		
		Firm/Company	
	3671 Prescott Loop		
		Address	
	Lakeland, Fl 33810		
		City/State and Zip Code	<del></del>
	wendie.durant@yahoo.com		F C C
Para Carthan In Committee	h-mail address: ( concerning this matter, please c	to be used for future annual report noti	neution)
	toncerning this matter, prease c		
Wendie Durant		813 857-9632 at ()	·
Name (	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he 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 Addre		<u>Street Address:</u> Registration Se	ction
Registration Section Division of Corporations		Division of Cor	
P.O. Box 632	27	The Centre of T	
Tallahassee.	FL 32314	2415 N. Monro	e Street. Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Durant Designs		
( <u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our record a Limited Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability C		and assigned
lorida document number 87-0818772	<u></u> .	
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
he new name must be distinguishable and contain the words "Lin	nited 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 ADDI	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		ؽ
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter</u>	the name of the ngw registe
Name of New Registered Agent:		
New Registered Office Address:		<u>.</u>
	Enter Florida street addres.	5
		oridaZin Code
	City	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 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
ambr	Wendie Durant	3671 prescott loop lakeland florida 33810	<b>≅</b> Add
			□Remove
			□ Change
			□ Add
			□Remove
			☐ Change
			□Add
			Remove
			□ Change
			□ Add
			□ Remove
			□Remove
			□Change
			□Add
			□Remove
			□Change

im the owner however afte	r trying to open a business account i was informed I will need to be added as an authorize
user. I need to very jordan	jones is already on there and Wendie Durant needs to be added as well.
<del></del>	
*****	
	Decision of the second of the
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<del> </del>	
E. Effective date, if other than the (If an effective date is listed, the date in	he date of filing:
<b>Note:</b> If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
If the record specifies a delayed effect record is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	2021
Dated	· · · · · · · · · · · · · · · · · · ·

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Typed or printed name of signce