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Special Instructions to	Filing Officer:	

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## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

Division of Co	rporations		
	VENT DECOR / DESIGN & I	FLORAL ARRANGEMENTS LI	_C
SUBJECT:	Name of Limi	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:	
	GUERNA SI	JRPRIS	
		Name of Person	
	NASHA EVENT DECOR	: / DESIGN & FLORAL ARRAN	IGEMENTS LLC
		Firm/Company	
	3100 CONGRESS	S PARK DR APT 1025	5
		Address	
	LAKE WOR	TH FL 33461	
	GUERNASURPRI	,	
		to be used for future annual report not	ification)
For further information of	concerning this matter, please ca	all:	•
GUERNA S	SURPRIS	954 226-2	2999
Name o	of Person		ne Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	S30.00 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)
Mulling Addre	re:	Straat Addrass	
Registration	Section	Registration Se	
Division of C	•		•
Enclosed is a check for to \$25.00 Filing Fee  Mailing Address Registration	SURPRIS  of Person  the following amount:  \$30.00 Filing Fee & Certificate of Status  Section  Corporations	all: at (954) 226-2 Area Code Daytin  \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	2999  ne Telephone Number  \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  ection reporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

October 17, 2021

GUERNA SURPRIS 3100 CONGRESS PARK DR APT. 1025 LAKE WORTH, FL 33461

SUBJECT: NASHA EVENT DECOR / DESIGN & FLORAL ARRANGEMENTS

LLC

Ref. Number: L21000341417

We have received your document for NASHA EVENT DECOR / DESIGN & FLORAL ARRANGEMENTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

You failed to list a suffix and sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist III

-www.sunbiz.org

Letter Number: 821A00025239

THE SECOND PROPERTY OF THE SECOND

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## NASHA EVENT DECOR / DESIGN & FLORAL ARRANGEMENTS 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 Compan	y were filed on 07/28/	/21	and assigned
Florida document number L21000341417			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
NASHA EVENT DECOR & MORE <u>LLC</u>			
The new name must be distinguishable and contain the words "Limited Lial	oility Company," the designat	ion "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			787
			1
Enter new mailing address, if applicable:			<del>-</del>
		· ·	
(Mailing address MAY BE A POST OFFICE BOX)		. <u>.                                   </u>	<del></del>
			<del></del>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our record	s, <u>enter the name of</u>	the new registe
New Registered Office Address:	Enter Florida stre	eet address	
<del>.</del>	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agen	•		•
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent at being filed to merely reflect a change in the registered offic	te performance of my de s provided for in Chapte	uties, and I am fam er 605, F.S. Or, if t	iliar with and his document is

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
			☐ Add ☐ Remove ☐ Change ☐ Add
			□Remove
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effective <u>e:</u> If th	date, if other than the date e date is listed, the date must be some date inserted in this block of seffective date on the Depart	pecific and cannot be prior to dolors not meet the applicable	late of filing or more than the statutory filing require	(optional) 00 days after filing.) Pursuant to 605 ements, this date will not be liste	.0207 ed as
cord spe s filed.	ecifies a delayed effective dat	e, but not an effective time	, at 12:01 a.m. on the ea	arlier of: (b) The 90th day after	r the
ed	9-29-	2021			
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Typed or printed name of signee