# H21000366010

(F	Requestor's Name)	
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SECRETARY OF STATE
TALLAHASSEE, FL

#### **COVER LETTER**

TO:

Tallahassee, FL 32314

RY CREATIONS LLC		
Name of Limi	ited Liability Company	
of Amendment and fee(s) are sub-	mitted for filing.	
pondence concerning this matter	to the following:	
TYLER JACQUES		
<del></del>	Name of Person	
	Firm/Company	
4400 SW 95TH AVENUE		
DAVIE, FL	Address	
		ification)
n concerning this matter, please ca	alt:	
	954 551-7823	
e of Person		ne Telephone Number
r the following amount:		
☐ \$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)
	Street Address: Registration So	ection
	Division of Co The Centre of	rporations
	DAVIE, FL  country_creations@ymail.co E-mail address: ( n concerning this matter, please co e of Person  stress: Certificate of Status  ress: Corporations	Name of Limited Liability Company  of Amendment and fee(s) are submitted for filing.  spondence concerning this matter to the following:  TYLER JACQUES  Name of Person  Firm/Company  4-400 SW 95TH AVENUE  Address  DAVIE, FL  City/State and Zip Code  country_creations@ymail.com  E-mail address: (to be used for future annual report not an concerning this matter, please call:  at (

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2822 MAY 16 PH 12: 52

COUNTRY CREATIONS LLC

(Name of the Limited Liability Company as it now appears on our records) CFE TARY OF STATE
(A Florida Limited Liability Company)

[ALLAHASSEE, FL]

The Articles of Organization for this Limited Liability Company	were filed on 08/13/2021	and assigned
Florida document number 1.21000366010		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
LUCKY AMERICAN DESIGNS, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" o	r 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>6.8</b>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new registered
agent and/or the new registered sittle and too are		
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	
	, Flori	ida
	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:

or removed from our records:		
MGR = Manager		
AMBR = Authorized Member		

<u>Title</u>	Name	Address	Type of Action
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			□Remove
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Dated			-· <del></del>	<u> </u>						
			Jah	Jung	<u> </u>			<u></u>		
		Signature of	a member or	rauthor//cd	representative	of a member				
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Filing Fee: \$25.00