

L21000372601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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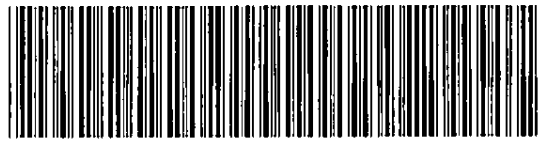
(Business Entity Name)

(Document Number)

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TALLAHASSEE FL

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dazzling Images  
Name of Corporation

**DOCUMENT NUMBER:** L21000372601

The enclosed Articles of ~~Correction~~ <sup>AMENDMENT</sup> and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bridget A. Webb  
Name of Contact Person

Dazzling Images Modeling Agency LLC.  
Firm/Company

2327 Everena Ave.  
Address

Fayetteville N.C. 28301  
City/State and Zip Code

bridgetwebb1969@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bridget A. Webb at ( 305 ) 796-0153  
Name of Contact Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$35.00 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy
- \$52.50 Filing Fee, Certificate of Status & Certified Copy

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

DAZZLING IMAGES

(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 Company were filed on August 19, 2021 and assigned Florida document number 121000372601.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

DAZZLING IMAGES MODELING AGENCY LLC.

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)**

3820 N.W. 183 St. Apt# D211

Miami, Florida 33055

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2327 Everena Ave.

Fayetteville N.C. 28301

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REGISTRY STATE  
TALLAHASSEE FL

**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

\_\_\_\_\_, Florida \_\_\_\_\_

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>	<u>Address</u>	<u>Type of Action</u>
MGR	CIARA WEBB	2323 EVERENA AVE FAYETTEVILLE NC 28301	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	CHARLES N. WEBB JR.	3820 NW 183 ST APT D-211	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

