KZ1000399149

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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration So Division of Cor			
Polished by	Keke LLC		
SUBJECT:		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:	
	Lukea Monsanto		
		Name of Person	
		Firm/Company	
	857 Franconville Court		
		Address	
	Kissimmee, FL 34759		
	polishedbykeke@gmail.con		
	E-mail address: (to be used for future annual report not	ification)
For further information c	concerning this matter, please ca	all:	
Lukea Monsanto		407 267-0963 at ()	
Name o	of Person	at () Area Code Daytin	ne 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 Address		Street Address:	ection
Registration Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

Polished by Keke LLC

2022 APR -4 AM II: 56

If Changing Registered Agent, Signature of New Registered Agent

(<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appea ed Liability Company)	rs on our records.) SEURETARY OF S.	TATE
The Articles of Organization for this Limited Liability Compa	my mars filestan ()9	IALLAHASSEE. 0/08/2021	FL and assigned
	my were fried on		and assigned
Florida document number 1.21000398149			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company h	ere:	
815 Creations LLC			
The new name must be distinguishable and contain the words "Limited Li	ability Company," the o	designation "LLC" or the ab	breviation "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. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	re address on our r	records, <u>enter the nam</u>	e of the new registere
New Registered Office Address:			
Enter Florida street address			
		Florida	Zip Code
	City		ZIP Code
New Registered Agent's Signature, if changing Registered Age	<u>nt:</u>		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compleaccept the obligations of my position as registered agent a being filed to merely reflect a change in the registered off, company has been notified in writing of this change.	ete performance of as provided for in (f my duties, and I am f Chapter 605, F.S. Or.	amiliar with and if this document is

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			□Remove
		•	□Change
			□Add
			□Remove
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			Remove
			□Change

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Note: If the	te, if other than the date of filing:
e record speci rd is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated March	2022
/	Luker Mangart Signature of a member or authorized representative of a member
1 1	ikea Monsanto
_	Typed or printed name of signee