

LA1000406403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

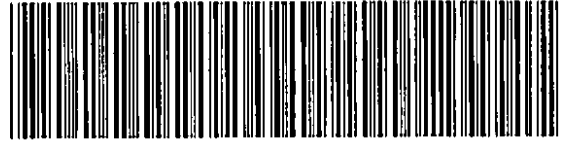
(Document Number)

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FILED
2023 MAY 26 PM 4:00
SECRET
TALLAHASSEE

40

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRYSTALL GALLIER ENTERPRISES LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BARBARA GALLIER CAMBPELL

Name of Person

CRYSTAL GALLIER ENTERPRISES LLC

Firm/Company

3930 OLD WINTER GARDEN ROAD

Address

ORLANDO, FLORIDA 32805

City/State and Zip Code

crystalgallierent@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BARBARA GALLIER CAMBPELL

407

375-8874

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration 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**

CRYSTAL GALLIER ENTERPRISES LLC

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

FILED
2023 MAY 26
TALLAHASSEE
SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company were filed on 09/14/2021 and assigned
Florida document number L21000406703.

This amendment is submitted to amend the following:

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

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:

3930 OLD WINTER GARDEN ROAD

(Principal office address MUST BE A STREET ADDRESS)

ORLANDO, FLORIDA 32805

Enter new mailing address, if applicable:

5413 REGAL OAK CR: ORLANDO, FL 32810

(Mailing address MAY BE A POST OFFICE BOX)

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:

ANDREW CAMPBELL

New Registered Office Address:

5413 REGAL OAK CIRCLE

Enter Florida street address

ORLANDO

City

Florida

32810

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	ANDREW CAMPBELL	5413 REGAL OAK CR; ORLANDO, FL 32810	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	AYANNA CAMPBELL	5413 REGAL OAK CR; ORLANDO, FL 32810	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	IYHALLA CAMPBELL	5413 REGAL OAK CR; ORLANDO, FL 32810	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BARBARA GALLIER CAMPBELL	3930 OLD WINTER GARDEN RD, ORL, FL 32805	<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"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ARTICLE II

3930 OLD WINTER GARDEN ROAD, ORLANDO, FLORIDA 32805

ARTICLE III

ANDREW CAMPBELL

5413 REGAL OAK CR: ORLANDO, FL 32810

ARTICLE IV

REMOVE THE FOLLOWING MANAGERS FROM ORIGINAL ARTICLES OF ORGANIZATION

ANDREW CAMPBELL

AYANNA CAMPBELL

IYHALLA CAMPBELL

AND REPLACE WITH BARBARA GALLIER CAMPBELL

3930 OLD WINTER GARDEN ROAD, ORLANDO, FLORIDA 32805

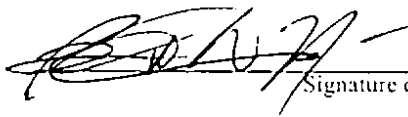
E. Effective date, if other than the date of filing: 11/18/2022 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated November 18, 2022



Signature of a member or authorized representative of a member

BARBARA GALLIER CAMPBELL

Typed or printed name of signee

COVER LETTER

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FILED
2023 MAY 26 PM 4:11
TALLAHASSEE
FLORIDA

10

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City

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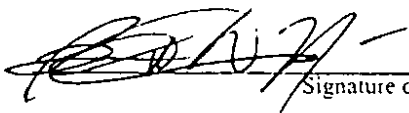
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- E. Effective date, if other than the date of filing:** 11/18/2022 **(optional)**
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Dated November 18, 2022



Signature of a member or authorized representative of a member

BARBARA GALLIER CAMPBELL

Typed or printed name of signee