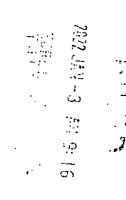
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Date:	01/03/2022	
Name:		
Reference #	4567667	.
Entity Name	MARY ALICE K	IBIT INTERIORS, LLC
Article	es of Incorporation/Authorization	to Transact Business
✓ Amer	ndment	
Chan	ge of Agent	
Reins	statement	
☐ Conv	ersion	
Merg	er	
Disso	olution/Withdrawal	
☐ Fictiti	ous Name	
Other	·	······································
Authorized A	Amoun: \$25.00	

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Account#: I20000000088

Date:	01/03/2022	
Name:		
Reference #:	4507007	_
Entity Name:	MARY ALICE KU	IBIT INTERIORS, LLC
Article	es of Incorporation/Authorization	to Transact Business
✓ Amen	dment	
☐ Chang	ge of Agent	
Reins	tatement	
Conve	ersion	
☐ Merge	er	
☐ Dissol	lution/Withdrawal	
☐ Fictition	ous Name	
Other		
Authorized A	mount: \$25.00	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARY ALICE KUBIT INTER	IOR DESIGN, LLC	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records Liability Company)	_)
he Articles of Organization for this Limited Liability Company	y were filed on 11/19/2021	and assigned
lorida document number <u>L21000498107</u> .		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lia	bility company here:	
MARY ALICE KUBIT INTERIOR	S, LLC	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
inter new principal offices address, if applicable:		2 <u>8</u>
Principal office address MUST BE A STREET ADDRESS		量多
		(ن : ۱۱
nter new mailing address, if applicable:		1054
failing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
		<u></u>
If amending the registered agent and/or registered office ent and/or the new registered office address here:	address on our records, enter t	he name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	rida
	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 amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
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			□Add □Remove □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
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`an effective date Fote: If the date	if other than the is listed, the date mu e inserted in this b etive date on the D	st be specific and lock does not n	I cannot be prior neet the applica	to date of filing				
record specifies I is filed.	s a delayed effectiv	/e date, but not	an effective ti	me, at 12:01 a	.m. on the earlie	er of: (b) The S	90th day aft	er the
ateds	January 3	,	,2022	·				
		Signature of a	member or author	<u>CA ∧UOA</u> rized represent	ative of a member	•		

Filing Fee: \$25.00