

121000515328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

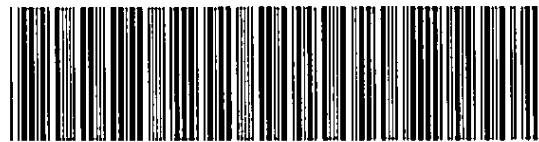
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2022 MAR -4 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER

MAR 15 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Studio D Meetings and Events

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:

LaZendra Danforth

Name of Person

Studio D Meetings and Events

Firm/Company

8214 NW 52nd St.

Address

Gainesville, FL 32653

City/State and Zip Code

contact@lazendradanforth.com

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

For further information concerning this matter, please call:

LaZendra Danforth

Name of Person

at (352) 246-5483

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee

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

Studio D Meetings and Events

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

FILED
2022 MAR -4 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FL
and assigned

The Articles of Organization for this Limited Liability Company were filed on 12/6/2021

Florida document number L21000515328

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:

(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 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:

Lazandra Danforth

New Registered Office Address:

8214 NW 52nd St

Enter Florida street address

Gainesville

City

Florida 32653

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.

Lazandra Danforth

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

| Title | Name | Address | Type of Action |
|-------|-------------------|-----------------------|---|
| MSHM | LaZendra Danforth | 8214 NW 52nd St. | <input checked="" type="checkbox"/> Add |
| | | Gainesville, FL 32653 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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This image shows a single page from a notebook or ledger. It features ten evenly spaced, thin black horizontal lines running across the width of the page. The background is plain white, and there are no margins, text, or other markings present.

(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)

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.

Signature of a member

Signature of a member or authorized representative of a member

Typed or printed name of signee



RECEIVED

2022 MAR -4 AM 8:02

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FL

January 10, 2022

LAZENDRA DANFORTH
8214 NW 52ND ST.
GAINESVILLE, FL 32653

SUBJECT: STUDIO D MEETINGS & EVENTS LLC
Ref. Number: L21000515328

We have received your document for STUDIO D MEETINGS & EVENTS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 522A00000625