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(Re	equestor's Name)	
(Ad	ldress)	<u></u> ,
(Ad	idress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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ECRETARY OF STATE

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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJ	ECT: Shelby Eve Photography LLC Name of Limited Liability Company
The en	nclosed Articles of Amendment and fee(s) are submitted for filing.
Plcase	return all correspondence concerning this matter to the following:
	Shelby Ewe Name of Person
	Shelby Eve Photography LLC Firm/Company
	1339 SWTb15 St. A
	Palm City, FL 34990 City/State and Zip Code
	F-mail address: (to be used for future annual report motification)
For fu	rther information concerning this matter, please call:
	Name of Person at (772) 631-1114 Name of Person Daytime Telephone Number
Enclos	ed is a check for the following amount:
ॼ \$2	15.00 Filing Fec ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status & 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

FILED

Shelby Eve Photography LLC	Company as it now appears on our records.)
(Name of the Limited Liability	Company as it now appears on our records.) Limited Liability Company) SECRETARY
(A Florida I	Company as it now appears on our records. Limited Liability Company) SECRETARY OF STATE February 10, 2022 1/2 SSEE, Fland assigned
	February 10, 2022 ASSEF, FI
The Articles of Organization for this Limited Liability Co	ompany were filed onand assigned
Florida document number	
riorida document flumoet	- '
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability company here:
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR	ESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	office address on our records, enter the name of the new registered
agent and/or the new registered office address here:	
NI CNI DI'A LA	
Name of New Registered Agent:	
No. 20 - 1 con 1 Office Address.	
New Registered Office Address:	Enter Florida street address
	TAILOT E SOFTIME OF OUT WATER
	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 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>	Address	Type of Action
<u>AMB</u> R	ShelbyEve	1239 SWIbis St.	WAdd
		Palm City, FL 34990	□Remove
			□ Change
MGR Trevor Eve	TrevorEve	1239 SWIbis St	🗆 Add
		Pain City, FL 34990	□Remove
			Nange
			□ Add
		□Remove	
			□Change
			□ Add
			□Remove
			Change
			□ Add
			□Remove
			□Change
			□ Add
			□Remove
			Change

-	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an ef) Note:	ive date, if other than the date of filing:
the recor	d 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 led.
Dated	Feb 23 , 2022.
	Signature of a member or authorized representative of a member
	TYC V OY EVC Typed or printed name of signee