Assured acconting Division of Corporations

4/28/22, 12:39 PM



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(((H220001539863)))



H220001539883ABC3

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ASSURED ACCOUNTING AND TAX SERVICES

Account Number : I20180000048 : (954)793-0353 Phone : (954)944-3163 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: NASCIMENTOREALTOR @ 6MAIL.COM

LLC AMNO/RESTATE/CORRECT OR M/MG RESIGN SALTLIFE CUSTOM ART AND DECOR LLC

Certificate of Status	0
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Help

ARTICLES OF AMENDMENT (((H22000153986 3))) TO ARTICLES OF ORGANIZATION OF

SALTLIFE CUSTOM	ART AND DECOR LLC	
(Name of the Limited Lighthy Compa (A Florida Limited I	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000136739</u>	were filed on03/21/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
SIMPLICITY ART & DECOR LLC The new name must be distinguishable and contain the words "Limited Liabil	lity 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 agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:		ZAPR
New Registered Office Address:		70 71 72 72 73 73 74 75 75 75 75 75 75 75 75 75 75 75 75 75
	Enter Florida street address	A CONTRACTOR
	, Florida _	Zip Cotto
New Registered Agent's Signature, if changing Registered Agent	•	10
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ree to act in this capacity. I further a e perforniance of my duties, and I an provided for in Chapter 605, F.S. O	n familiar with and Fr, if this document is
If Cha	anging Registered Agent, Signature of New	Registered Agent

(((H22000153986 3)))

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c: If the date	if other than the date of filling is listed, the date must be specific as a inserted in this block does not ctive date on the Department of	meet the applicat	date of filing or male statutory filing	(option of the contract of the	onal) filing.) Pursuant to 605.026 s date will not be listed a
cord specifics s filed.	s a delayed effective date, but n	ot an effective tim	ic, at 12:01 a.m. c	on the earlier of: (b) The 90th day after th
ed	APRIL 28th	_,	<u>.</u> ·		
	<u> </u>	nto (Apr 28, 2022 12	·35 FDT)		
	Patricia Nascime	1110 Abi 10' 1055 15	zed representative		

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

(((H22000153986 3))) MGR = Manager AMBR = Authorized Member

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