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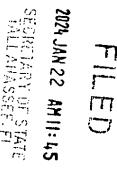
And
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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## **COVER LETTER**

	reations of Southwest Florida, L	LC				
SUBJECT: Name of Limited Liability Company						
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	Donna L. D'Angelo					
		Name of Person				
	Content Creations of Southwest Florida, LLC					
	Firm/Company					
	520 Nottingham Drive					
	<del> </del>	Address				
	Naples, FL 34109					
	<del>.</del>					
	donnadangelo13@gmail.com					
	E-mail address: (	to be used for future annual report notif	fication)			
For further information	concerning this matter, please ca	all:				
Donna L. D'Angelo		239 285-8064 at ()				
Name	of Person	Area Code Daytimo	e Telephone Number			
Enclosed is a check for	the following amount:					
☐ \$25.00 Filing Fcc	☐ \$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

Content Creations of Southwest Florida, LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records. Liability Company)	<del>)</del>
he Articles of Organization for this Limited Liability Company	were filed on April 21, 2022	and assigned
orida document number L22000191585		
nis amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	oility company here:	
ak & 5th Design, LLC		
ne new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC"	or the abbreviation "L.L.C,"
nter new principal offices address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRESS)		<u> 2</u>
		2024 355
nter new mailing address, if applicable:	N/A	N22 M
Tailing address MAY BE A POST OFFICE BOX)		SS A M
		ms = O
	<u> </u>	- F. 5
. If amending the registered agent and/or registered office	address on our records, enter th	111 -
ent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Flor	ida
	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
			□Add
			□ Remove
			□Change
			🗆 Add
			□Remove
			□ Change
		-	□Add
		<del></del>	□Remove
			□Change
			□Add
			⊡Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A E. Effective date, if other than the date of filing: (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. January 15 Dated \_\_ Signature of a member or authorized representative of a member Donna L. D'Angelo

Filing Fee: \$25.00

Typed or printed name of signee