## L22 000 409 057

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	_
(Cit	ty/State/Zip/Phone	e #)
		,
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificate:	s of Status
•	_	
Special Instructions to	Filing Officer:	<del> </del>
		,

Office Use Only

A. RIVERS

DEC - - -



400395308094

10.07/22--01011--012 \*\*25.00

2022 007 - 7 PM 2: 55

## **COVER LETTER**

TO: Registration S Division of Co					
B. Lovell	Interior, LLC				
SUBJECT:					
The enclosed Articles of	f Amendment and fee(s) are sub	amitted for filing			
	condence concerning this matter	_			
	ondense someoning in maner	to mo tono a mg.			
	Daniel S Friebis				
		Name of Person			
	Friebis & Associates				
		Firm/Company			
	3890 Turtle Creek Drive,	Suite B			
	<del></del>	Address			
	Port Orange, FL 32127				
		City/State and Zip Code			
	Dan.friebis@kyrstin.net  E-mail address: (	to be used for future annual report not	lification)		
For further information	concerning this matter, please c	all:			
Daniel S Friebis		386 492-7915			
Name	of Person	at () Area Code Daytin	ne 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 Addre		Street Address: Registration Se	ection		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

B. Lovell Interior, LLC		
( <u>Name of the Limited Lial</u> (A Flor	pility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on September 19, 2022	and assigned
Florida document number L22000409057	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
B. Lovell Interiors, LLC		
The new name must be distinguishable and contain the words "L	imited 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 AD)	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	· · · · · · · · · · · · · · · · · · ·	0 ==
B. If amending the registered agent and/or register	red office address on our records, enter the na	me of the new register
agent and/or the new registered office address here		JCT J
		1
Name of New Registered Agent:		
New Registered Office Address:		F E
New Registered Office Address.	Enter Florida street address	15 5
	, Florida	当 <b>5</b>
<del></del>	, Florida _	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
			□Remove
			☐Change
			□Add
			Remove
			□Change
		<del></del>	□Add
		□Remove	
			Change
			□Add
			□Remove
			Change
			□Add
		□Remove	
		<u>.</u>	
			□Add
			□Remove
			□Change

	Belinda Lovell		led name of signee		
	Behle	Signature of a member or auth	orized representative of	a member	<del></del>
Dated .	September 23	2022	·		
f the record	d specifies a delayed effective ed.	e date, but not an effective t	ime, at 12:01 a.m. on	the earlier of: (b) T	he 90th day after the
(If an effe Note:	ve date, if other than the ective date is listed, the date must If the date inserted in this bloent's effective date on the De	be specific and cannot be prior ock does not meet the applic	able statutory filing t	(optional) e than 90 days after filing requirements, this date	(3) Pursuant to 605.0207
_		<del> </del>			
_					
-			<del></del>		
-					<del></del>
_					
-			-		<del></del>
_					
_			<del> </del>		
_					
-	-	- <del>-</del>			
-					<del></del>

.

Filing Fee: \$25.00