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SECONDINATE OF STATE

1/8/2023

COVER LETTER

Tallahassee, FL 32314

	Registration Se Division of Cor			
eun ira		SIGN INTERIORS		
SUBJEC	z1:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Jeannette Simmons		
			Name of Person	
			Firm/Company	
		PO BOX 731752		
			Address	.
		Ormond Beach, FL 32173		
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		jeannetteksimmons@gmail	.com to be used for future annual report:	notification)
For furth	er information c	oncerning this matter, please of	-	
Jeannett	e Simmons		386 956-2133	3
 	Name o	f Person	Area Code Day	rtime Telephone Number
Enclosed	l is a check for th	ne 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 Addres		Street Address	
	Registration S Division of C		Registration Division of (
	P O Box 632	-		of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 OCT 14 AM 11: 07

SORT+DESIGN INTERIORS, LLC

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

SECHETATA STATE TALLAHASSEE, FI

The Articles of Organization for this Limited Liabili	ty Company were filed on	October 7, 2022	and assigned
Florida document number L22000432969	·		
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company	y here:	
SORT AND DESIGN INTERIORS, LLC			
The new name must be distinguishable and contain the words	"Limited Liability Company,"	he designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET A)	DDRESS)		
	<u></u>		
Enter new mailing address, if applicable:			
man	·	-	
• • •	า		
•	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX		or records, enter the	name of the new register
• • •	tered office address on ou	ır records, <u>enter the</u>	name of the new register
(Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or regist	tered office address on ou	ır records, <u>enter the</u>	name of the new register
(Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or regist	tered office address on ou	or records, enter the	name of the new register
Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or regist agent and/or the new registered office address he Name of New Registered Agent:	tered office address on ou	or records, enter the	name of the new register
Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or regist agent and/or the new registered office address he	tered office address on ou re:	or records, enter the	name of the new register
Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or regist agent and/or the new registered office address he Name of New Registered Agent:	tered office address on ou re:	Florida street address	
Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or regist agent and/or the new registered office address he Name of New Registered Agent:	tered office address on ou re:	-	
Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or regist agent and/or the new registered office address he Name of New Registered Agent:	tered office address on oure: Enter	Florida street address	

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Add
		 	□Remove
			□Change
			□Add
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Note: If the	te, if other than the late is listed, the date mus date inserted in this bl ffective date on the D	ock does not	meet the app	licable statutor	g or more than 90 y filing requiren	(optional) days after filing nents, this date) Pursuant to 605.0 will not be listed
If the record speci record is filed.	ifies a delayed effectiv	e date, but no	ot an effective	time, at 12:01	a.m. on the ear	lier of: (b) Th	e 90th day after t
Dated Octob	ет 10		, 2022	 ·			
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Filing Fee: \$25.00