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COVER LETTER

TO: Registration S Division of Co		
	ndustrial Services, LLC.	
SUBJECT:	Name of Lim	ited Liability Company
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.
Please return all corresp	nondence concerning this matter	to the following:
	Tony Currie	
		Name of Person
	Creative Industrial Service	s, LLC.
	-	Firm/Company
	1595 NE 135th Street, Apt	420
		Address
	North Miami, FL 33261	
	tonycurrie@ymail.com E-mail address: (t	City/State and Zip Code o be used for future annual report notification)
For further information	concerning this matter, please ea	dt:
Tony Currie		954 815-1261 at ()
Name	of Person	Area Code Daytime Telephone Number
Enclosed is a check for t	the following amount:	
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee. Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 633 Tallahassee,	Section Corporations 27	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

Creative Industrial Services, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/27/2022 ___ and assigned Florida document number $\frac{1.23000001839}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 1595 NE 135th Street Enter new principal offices address, if applicable: Apt 420 (Principal office address MUST BE A STREET ADDRESS) North Miami, FL 33261 P.O. Box 612884 Enter new mailing address, if applicable: North Miami, FL 33261 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Tony Currie Name of New Registered Agent: 1595 NE 135th Street Apt 420 New Registered Office Address: Enter Florida street address North Miami Cin

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.

Tony Curris
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
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		-	□ Change
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is filed.			. ======		
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Filing Fee: \$25.00