

L23000077671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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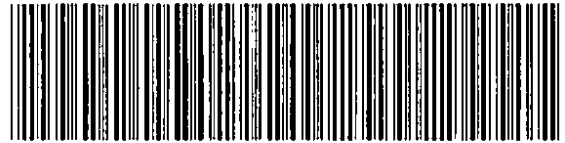
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2023 FEB 21 PM 3:41

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TALLAHASSEE, FLORIDA

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**Registration Section
Division of Corporations**

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

DESIGN AND CRAFT LLC

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

Articles of Organization for this Limited Liability Company were filed on _____ and assigned
file document number L23000077671

This amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

TOP DESIGN AND CRAFT LLC

(A name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C.")

If new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS

If new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City Zip Code

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 understand 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 Changing Registered Agent, Signature of New Registered Agent

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

MR = Manager

MR = Authorized Member

<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	<input type="checkbox"/> Add
_____	_____	<input type="checkbox"/> Remove
_____	_____	<input type="checkbox"/> Change
_____	_____	<input type="checkbox"/> Add
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_____	_____	<input type="checkbox"/> Remove
_____	_____	<input type="checkbox"/> Change

[illegible]

(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.

Dated 02-21-2023

Signature of a member or authorized representative of a member

OROSMAN ESPINETA GONZALEZ

Typed or printed name of signee

Filing Fee: \$25.00