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Division of Corporations

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: (850)617-6383

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : 120030000043 Phone : (800)342-9856

Fax Number

: (800)354-3381

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FIRENZE WALL DECORATING LLC

SET TO THE DESIGNATION OF THE SET OF THE STATE

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Firanze wall decorating IJc  |  |   |
|--|--|---|
| البله الحالملادة ( <u>A Ploridi</u><br>(A Ploridi) المعاددة العاددة ا  | Ity Company as It now appears on our records.) a Lamica Liability Company)                       |   |
| The Articles of Organization for this Limited Liability C<br>Florida document number 123000292259  | Сотряну were filed on <u>06/16/2023</u>  | and assigned                            |
| This amendment is submitted to amend the following:  |  |   |
| A. If amending name, enter the new name of the lim   | sted Hability company here:  |   |
| Northside Design LLC   |  |   |
| The new name must be distinguishable and contain the words "Lim  | illed Liability Company," the designation "LLC" or the abb                                       | reviation "L.L.C."                      |
| Enter new principal offices address, if applicable:  |  |   |
| (Principal office address MUST BE A STREET ADDI  |  |   |
|  |  |   |
|  |  |   |
| Enter new mailing address, if applicable:  |  |   |
| (Mailing address MAY BE A POST OFFICE BOX)   |  |   |
|  | ·  |   |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here:   | d office address on our records, <u>enter the name</u>   | of the new registered                   |
| Name of New Registered Agent:  |  |   |
| New Registered Office Address:   |  |   |
|  | Enter Florida street address   | 2,                                      |
|  | , Florida  |   |
|  |  | Zip Code                                |
| New Registered Agent's Signature, If changing Registered   |  | · • • • • • • • • • • • • • • • • • • • |
| I herehy accept the appointment as registered agent a<br>provistons of all statutes relative to the proper and co<br>accept the obligations of my position as registered ag<br>being filed to merely reflect a change in the registere<br>company has been notified in writing of this change. | omplete performance of my duties, and I am fa<br>gent as provided for in Chapter 605, F.S. Or, i | miliar with and<br>Ethis document is    |
|  | If Changing Registered Agent, Signature of New Regi  | stered 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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| Effective date i                                   | f other than the date of filing:  |
| If an effective dats i<br><u>Note:</u> If the date | s listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a tive date on the Department of State's records. |
| e record specifies<br>rd is filed.                 | a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th   |
| Dated  | 09/01 aoas  |
|  | Signature of affilember of alithorized representative of a member   |
| Georg  | e Efstathiou  |
|  | Typed or printed name of signee   |