Division of Corporations

## Florida Department of

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To:

Division of Corporations

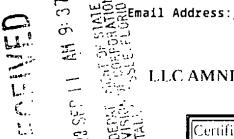
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (813)436-5206

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



## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LAMBLIGHT CREATIVE LLC

Certificate of Status	0
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To 18506176383

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lamblight Creative LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Fiorida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/03/2023 \_\_\_\_\_ and assigned Florida document number L23000315614 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" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 13635 82nd Ln N Enter new mailing address, if applicable: West Palm Beach, FL 33412 (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:

Name of New Registered Agent: New Registered Office Address: Enter Florida street address

CIIV

## New Registered Agent's Signature, it 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>	<u>Address</u>	Type of Action
AMBR	Kyle Schnack	7901 4th St N STE 300	<b>X</b> Add
		St. Petersburg, FL 33702	□Remove
			UChange
AMBR	Summer Hoskins	7901 4th St N STE 300	<b>X</b> ìAdd
		St. Petersburg, FL 33702	□Remove
			TlChange
AMBR	Joshua Lubben	7901 4th St N STE 300	<b>X</b> !Add
		St. Petersburg, FL 33702	
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To 18506176383

From Registered Agents Inc.

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Cum	nt's effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
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nted .	
	Signature of a member or authorized representative of a member