

L230009103159

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(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FL

A. HUNT

06/13/24

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Sage & Whimsy Designs LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jessica Wolk

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

712 Commodore Dr

\_\_\_\_\_  
Address

Plantation, FL 33325

\_\_\_\_\_  
City/State and Zip Code

Jessr240@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Wolk

954

297-1161

at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
240 S. Gadsden St.  
Tallahassee, FL 32301

RECEIVED  
JAN 13 AM 6:32  
STATE OF FLORIDA  
TALLAHASSEE, FL

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Sage & Whimsy Designs 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 08/28/2023 and assigned  
Florida document number L23000403159

This amendment is submitted to amend the following:

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

Jessica Wolk Designs LLC

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

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

**(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*

Florida

*City*

*Zip Code*

**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.*

**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>	<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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OFFICE OF THE  
CLERK OF THE  
SUPREME COURT  
JAN 13 AM 6:32  
TALLAHASSEE, FL

2074 11 13 AM 6:32  
CLARK COUNTY FL  
CLARK COUNTY FL

2074 13 AM 6:32  
DEPT OF STATE  
LEADSSEE:FL

(If 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 June 7, 2024

*Jessica Work*  
Signature of a member or author

Signature of a member or authorized representative of a member

Jessica Wolk

Typed or printed name of signee