L24000392313

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Only/Glate/2/p/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filing Officer:





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09/19/24--01005--006 **25.00

COVER LETTER

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT: A LA Party Runt	ed AND DECOR LLC ited Liability Company
The enclosed Articles of Amendment and fee(s) are sub-	mitted for filing.
Please return all correspondence concerning this matter	to the following:
Taby JOH	Name of Person
AIA Party	Pental AND Decorlic
1391 NW	425+. Address
	F1 33142 City/State and Zip Code
E-mail address: (0	alaparty rentals @ Gyna. 1. Cerro be used for future annual report notification)
For further information concerning this matter, please co	all:
1 Luby Johnson Brids	es at 786, 54115876
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee S30.00 Filing Fee & Certificate of Status	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	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

		on our records, <u>enter the na</u>	ame of the new registered
B. If amending the registered agent and/or regingent and/or the new registered office address by		on our records, <u>enter the n</u>	ame of the new registered
<u>(Mailing address MAY BE A POST OFFICE BO</u>	<u></u>		7
Enter new mailing address, if applicable:			<u>்</u> ஐ ் ப
			E 5
Principal office address MUST BE A STREET	<u>ADDRESS)</u>		
Enter new principal offices address, if applicab			24 8
The new name must be distinguishable and contain the word	IS AND is "Limited Liability Comp	pany," the designation "LLC" or the	abbreviation "L.L.C."
A. If amending name, enter the new name of the			
This amendment is submitted to amend the follow	ing:		
Florida document number <u>L2400039</u>	2313	•	
The Articles of Organization for this Limited Liab	ility Company were fi	led on 9/9/2024	and assigned

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>	Address	Type of Action
AMBR	Ruby Johnson Bridges	1391 NW 42 St.	DAdd
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n effect	e date, if other the live date is listed, the c the date inserted in	late must be speci-	fic and conne	ot be prior to d	ate of tiling or a	nore than 90 da	ys after tiling.) its. this date v	Pursuant to 605.02 vill not be listed	207 as
cumen	t's effective date or	the Departmer	it of State's	records.	, omitaior y 1111.	g requiremen			
	specifies a delayed o	effective date, b	ut not an ef	fective time,	at 12:01 a.m.	on the earlier	of: (b) The	90th day after th	10
is filed									
ited	9113		12	024					
	1/-	Adjanua Johnson	— · —	· · · · · · · · · · · · · · · · · · ·					
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	4 — ·	Signature	e of a membe	er or authorize	ed representativ	e of a member			
	_	10/12/2017							

Filing Fee: \$25.00