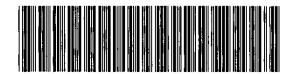
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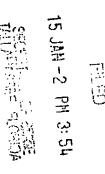
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

	ration Section on of Corpor						
SUBJECT:	ccent Des	ign Management Ser	vices LLC				
SOBSECT:	Name of Limited Liability Company						
The enclosed Ar	rticles of Am	endment and fee(s) are subn	nitted for filing.				
Please return all	corresponde	nce concerning this matter t	o the following:				
		Louis Shaw					
			Name of Person				
			Firm/Company				
		32 S Main Street, Su	ite C				
	Address						
		Medford, NJ 08055					
		City/State and Zip Code stylevacationhomes@gmail.com E-mail address: (to be used for future annual report notification)					
For further infor	mation conc	E-mail address: (10 erning this matter, please ca		report notification)			
Louis Shaw		oning and maner, product ou		75-8268			
	Name of Pe	rson	at ()	Daytime Telephone	Number		
Enclosed is a ch	ock for the f	ollowing amount:					
□ \$25.00 Filin	ng Fee (□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is end	closed) Co	0.00 Filing Fee, entificate of Status & entified Copy iditional copy is enclosed)		

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



December 10, 2014

LOUIS SHAW 32 S MAIN STREET SUITE C MEDORD, NJ 08055

SUBJECT: ACCENT DESIGN MANAGEMENT SERVICES LLC

Ref. Number: M14000003456

We have received your document for ACCENT DESIGN MANAGEMENT SERVICES LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 314A00026088

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

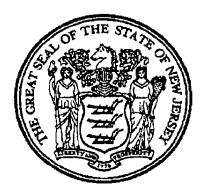
1.	me of limited liability Company as it appears on the records of the Florida Department of te: Accent Design Management Services LLC				
	State. Hazar Design Manageneri Del Viero Loc				
2.	Jurisdiction of its organization:				
3.	Date authorized to do business in Florida: 5 21 14				
SI	ECTION II (4-7 complete only the applicable changes)				
	New name of the limited liability company: Lavis SHAW LLC (must contain "Limited Liability Company, ""L.L.C.," or "LLC.")				
Flo the	Ename unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting a alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." "LLC.")				
5.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:				
-	N/A				
	If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: ** *** *** *** *** *** *** *** *** **				
_	<u> </u>				
7.	Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized. Signature of the authorized representative				
	Lauis SHAW				
	Typed or printed name of signee				

Filing Fee: \$25.00

STATE OF NEW JERSEY DEPARTMENT OF TREASURY FILING CERTIFICATION (CERTIFIED COPY)

LOUIS SHAW, LLC 0400138564

I, the Treasurer of the State of New Jersey, do hereby certify, that the above named business did file and record in this department a Certificate of Amendment on December 4th, 2014 and that the attached is a true copy of this document as the same is taken from and compared with the original(s) filed in this office and now remaining on file and of record.



Certificate Number: 134630784

Verify this certificate online at https://wwwf.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 23rd day of December, 2014

Andrew P Sidamon-Eristoff
State Treasurer

REG-C-EÀ

STATE OF NEW JERSEY

Mail to: PO Box 308 Trenton, NJ 08646

DIVISION OF REVENUE BUSINESS ENTITY AMENDMENT FILING

FEE REOUIRED

Refe	plete the following information and sign in the space provided. Please note that once the information on this page is considered public, r to the instructions for delivery/return options, filing fees and field-by-field requirements. Remember to remit the appropriate fee amount for this 2. Use attachments if more space is required for any field, or if you wish to add articles for the public record.							
A.	Business Name: Accent Design Management Services LLC							
	Business Entity NJ 10-digit ID number: 0 4 0 0 1 3 8 5 6 4							
В,	Statutory Authority for Amendment: 42:2B (See Instructions for List of Statutory Authorities)							
C.	ARTICLE name OF THE CERTIFICATE of the above referenced business is amended to read as follows. (If more space is necessary, use attachment) Name of Business changed to the following: Louis Shaw, LLC The business continues to be a domestic LLC, registered in the state of NJ, with FEIN 26-3843228 (263-843-228/000 for NJ)							
D.	Other Provisions: (Optional)							
E.	Date Amendment was Adopted:11/25/14							
F.	CERTIFICATION OF CONSENT/VOTING: (If required by one of the following laws cited, certify consent/voting) N.J.S.A. 14A:9-1 et seq. or N.J.S.A 15A:9-1 et seq., Profit and Non-Profit Corps. Amendment by the Incorporators R. Amendment was adopted by unanimous consent of the incorporators.							
	N.J.S.A 14A:9-2(4) and 14A:9-4(3), Profit Corps., Amendment by the Shareholders Amendment was adopted by the Directors and thereafter adopted by the shareholders. Number of shares outstanding at the time the amendment was adopted, and total number of shares entitled to vote							
	thereon If applicable, list the designation and number of each class/series of shares entitled to vote:							
	List votes for and against amendment, and if applicable, show the vote by designation and number of each class/series of shares entitled to vote:							
	Number of Shares Voting for Amendment Number of Shares Voting Against Amendment							
	** If the amendment provides for the exchange, reclassification, or cancellation of issued shares, attach a statement indicating the manner in which same shall be effected.							
	N.J.S.A. 15A:9-4, Non-profit Corps., Amendment by Members or Trustees The corporation has C does not have C members. If the corporation has members, indicate the number entitled to vote and how voting was accomplished:							
	may vote as a class, set forth the number of members in each class, the votes for and against by class, and the number present at the meeting: Class Number of Members Voting for Amendment Voting Against Amendment Voting Agains							
	☐ Adoption was by unanimous written consent without a meeting.							
	If the corporation does not have members, indicate the total number of Trustees, and how voting was accomplished: \[At a meeting of the corporation. The number of Trustees VOTING FOR and VOTING AGAINST \[Adoption was by unanimous written consent without a meeting.							
G.	AGENT/OFFICE CHANGE New Registered Agent:							
	Registered Office: (Must be a NJ street address) Street							
H.	SIGNATURE(S) FOR THE PUBLIC RECORD (See Instructions for Information on Signature Requirements)							
Sign	ature 5 Com Title Owner Date 11 25/10							
Sign	atureDate							
,	The above-signed certifies that the business entity has complied with all applicable NJ statutory filing requirements 2711787							

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