M24000005724

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
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,
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COVER LETTER

-	gistration Section vision of Corporations			
SUBJECT	Illuminated Design Services, LLC			
		rign Limited Li	ability Co	mpany
Dear Sir or	Madam:			
The enclose	ed application, certificate and fee(s) are submitte	d for filing	ត.
Please retur	m all correspondence concerning	this matter to th	ne followi	ng:
Ross J. Muns	sterman			
	Name of Person			
Featherstun.	Gaumer, et. al.			
	Firm/Company			
P.O. Box 176	1 11			
	Address		_	
Decatur, IL 6	52525			
	City/State and Zip Co	ode	_	
sweber@liais	sontechgroup.com			
E-mail ac	ldress: (to be used for future annu	ial report notifi	cation)	
For further	information concerning this matte	er, please call:		
Ross J. Muns	sterman	217 at (4453	
	Name of Person	Area Co	de & Dayt	time Telephone Number
Reg Div P.O	hing Address: distration Section dision of Corporations dispose Box 6327 dahassee, FL 32314		Division The Ce 2415 N	address; ration Section on of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, F1, 32303
	losed is a check for the followin			
□\$25 Filing	g Fee \$30 Filing Fee & Certificate of Status	□ \$55 Filin Certified	-	□ \$60 Filing Fee, Certificate of Status & Certified Copy

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

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	ars on the records of the Florida Department of
State: Illuminated Design Services, LLC	
Enter new principal office address, if applicable:	: <u>N/A</u>
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
2. The Florida document number of this limited E	liability company is: M24000003724
3. Jurisdiction of its organization: Delaware	
	arch 25, 2024
SECTION II (5-9 complete only the applicable	
5. New name of the limited liability company: 1	Illuminated Lighting Design Services, LLC
(mu	ust contain "Limited Liability Company, " "L.L.C.," or "LLC.")
	ed for the purpose of transacting business in Florida and attach a nanaging members adopting the alternate name. The alternate name L.C." or "L.L.C.")
6. If amending the registered agent and/or registered agent and/or the new registered office a	ered officer address on our records, enter the name of the new address here:
Name of New Registered Agent: N/A	
New Registered Office Address: N/A	
	Enter Florida Street Address
_	, Florida
	City Zip Code
the provisions of all statutes relative to the proper and accept the obligations of my position as regis	zent and agree to act in this capacity. I further agree to comply with er and complete performance of my duties, and I am familiar with istered agent as provided for in Chapter 605, F.S. Or, if this ge in the registered office address, I hereby confirm that the limited

If Changing Registered Agent, Signature of New Registered Agent

itle/ Capacity	<u>Name</u>	Address	Type of Action
			□Add
			□Remov
			□Remov
			□Add
	-		□Remov
			□Add
	-		□Remov
			□Add
	ficate, if required; no more than 90 day nendment(s), duly authenticated by the	s old, evidencing the official having custody of records in the	□Remov

Filing Fee: \$25.00

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "ILLUMINATED DESIGN
SERVICES, LLC", CHANGING ITS NAME FROM "ILLUMINATED DESIGN
SERVICES, LLC" TO "ILLUMINATED LIGHTING DESIGN SERVICES, LLC",
FILED IN THIS OFFICE ON THE TWENTY-FOURTH DAY OF APRIL, A.D.
2024, AT 10:21 O'CLOCK A.M.



Authentication: 203327309

Date: 04-24-24

STATE OF DELAWARE CERTIFICATE OF AMENDMENT OF CERTIFICATE OF FORMATION

The undersigned authorized person, desiring to amend the limited liability company formation pursuant to Section 18-202 of the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1.	The name of the limited liability company is <u>Illuminated Design Services</u> , <u>LLC</u>
2. as fo	The Certificate of Formation of the limited liability company is hereby amended ollows:
1. Th	e name of the limited liability company is Illuminated Lighting Design Services, LLC.
	By: Steven Weber
	Authorized Person
	Steven E. Weber Manager
	Name: Steven E. Weber, Manager
	Print or Type

State of Delaware
Secretary of State
Division of Corporations
Delivered 10:21 AM 04/24/2024
FILED 10:21 AM 04/24/2024
SR 20241618236 - File Number 3162343

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ILLUMINATED LIGHTING DESIGN SERVICES,

LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF APRIL, A.D. 2024.



Authentication: 203327310

Date: 04-24-24