P15000003849

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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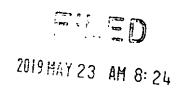
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: EcoSarasota, Inc		
DOCUMENT NUM	BER: P15000003849		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Keffie Lancaster		
		Name of Contact Person	1
		Firm/ Company	
	2490 Hibiscus St		
		Address	
	Sarasota, FL 34239		
		City/ State and Zip Cod	e
ketfii	elancaster@gmail.com		
		sed for future annual report	notification)
		-	
For further information	on concerning this matter, pleas	se call:	
Keffie Lancaster		ar () 587-8416 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street Address	
Am	endment Section	Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327			Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



(Name of Corporatio	n as currently filed with the Florida Dept. of State)
EcoSarasota, Inc	
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the con	poration:
All Things Design, Inc	The new
	" "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD.	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BO)</u>	9
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
 	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	ictarad Agant
	I am familiar with and accept the obligations of the position.
	CM D
Signa	iture of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	njth	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Add				
Kemove				
6) Change		_ _		
Add				
Remove				

	(Be specific)	
		
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	May 1, 2019	
The date of each amendment(s) ado	ption:	_, if other than the
date this document was signed.		
Effective date if applicable:		
Effective date a applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will rurtment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ted by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	oved by the shareholders through voting groups. The following statement uch voting group entitled to vote separately on the amendment(s):	
	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
action was not required.	ted by the board of directors without shareholder action and shareholder	
DatedSignature		_
selected,	by an incorporator – if in the hands of a receiver, trustee, or other court diffiduciary by that fiduciary)	
К	effic Lancaster	
_	(Typed or printed name of person signing)	
Р	resident	
-	(Title of person signing)	<u> </u>