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(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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TO:

Registration Section

Division of Corporations						
r11:-	D 1 - 1. 4 - 1. 4	1 1 1 1 1				
SUBJECT: <u>E1115</u>	Road Industrial C Name of Lin	nited Liability Company				
The enclosed Articles of a	Amendment and fee(s) are sul	omitted for filing.				
Please return all correspon	ndence concerning this matter	to the following:				
	Anon Ande	7540				
	Aaron Ande	Name of Person				
	Ellis Road In	redustrial Complex LL Firm/Company	<u>C</u>			
	4320 Woodlan	J Park Drive				
		Address				
	West Melhourne	Florida 3290 4 City/State and Zip Code				
		Levelopers, Lom (to be used for future annual report notif				
For further information co	oncerning this matter, please c	all:				
Paula Park		at (<u>32/</u>) <u>723-39</u> Area Code Daytim	400 ext. 201			
Name of	Person	Area Code Daytim	e Telephone Number			
Enclosed is a check for the	e following amount:					
S25.00 Filing Fee	S30.00 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		Street Address:	ation.			
Registration Section Division of Corporations		Registration Sec Division of Cor				
P.O. Box 6327		The Centre of Tallahassee				
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810			
		Tallahassee, FL	32303			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

71:-

Ellis Road Indust	tial Complex LI		21 10:16
Ellis Road Indust (Name of the Limited Lia (A Flo	bility Company as it now app orida Limited Liability Compan	ears on our records.) ')	
The Articles of Organization for this Limited Liability		8-11-2003	and assigned
Florida document number <u>L 03 0000 30 22 /</u>	 ·		
This amendment is submitted to amend the following	; ;		
A. If amending name, enter the new name of the l	imited liability company	<u>here</u> :	
The new name must be distinguishable and contain the words "	Limited Liability Company," th	e designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registe agent and/or the new registered office address her		records, enter the r	name of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Fnsor F	lorida street address	
	City	, Florida	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 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 4320 Woodland Park Dave	Type of Action
MGR	Agron Anderson	w. Melbourne, Florida 32964	X Add
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			🗆 Add
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		 	□Change
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			□Remove
			□Change
			□Add
			□Remove
			⊟Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(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. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. addre of a number or authorized representative of a member Aaron Anderson
Typed or printed name of signee

Filing Fee: \$25.00