L07000041355

(Requestor's Name)						
(Address)						
(Address)						
, , , ,						
(City/State/Zip/Phone #)						
(City/Clate/21p/1 Holle #)						
PICK-UP WAIT MAIL						
•						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
1						





100181670221

06/07/10--01016--001 **25.00

10 JUN -7 AM 10: 57
SESSIVE OF STATE

COVER LETTER

	Registration Se Division of Co				
SUBJEC	∵T∙	A.C.C. MAI	NAGEMENT, LLC		
SOBJEC	···	The state of the s	ted Liability Company		
The encle	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		Angelo Custodio Name of Person			
			Name of Ferson		
		`A.C	C:C:Management, LLC Firm/Company		
•			rimi/Company		
	5044 NW 125th Avenue				
			Address		
		Co	oral Springs, FL 33076		
			City/State and Zip Code		
	:,. ·	E-mail address: (cteam3@yahoo.com to be used for future annual report notific	ation)	
For furth	er information of	concerning this matter, please of	ali:	• ;	
Angelo Custodio			at t	75-3014	
	Name o	of Person	Area Code & Daytime	Telephone Number	
Enclosed	l is a check for t	he following amount:			
\$25.0	0 Filing Fee	☐\$30.00 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: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661/Executive Cen (Tallahássee, FL 3230	tions ter Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FEED

10 JUN -7 AM 10: 57 A.C.C. MANAGEMENT, LLC (Name of the Limited Liability Company as it now appears on our records).

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on January 13, 2010 and assigned L07000041355 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 5044 NW 125th Avenue Coral Springs, FL 33076 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 5044 NW 125th AVENUE New Registered Office Address: Enter Florida street address 33076 Coral Springs ____, Florida ___ City

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action Address **Title Name** MGR Manuel Custodio 5044 NW 125th Avenue Coral Springs, FL 33076 📝 Add Remove Add Remove Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) AM IO: 2010 June 2 Dated Signature of a member or authorized representative of a member **Audrey Custodio** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00