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(Requ	uestor's Name)
(Addre	ess)
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(City/S	State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busin	ness Entity Name)
(Docu	ument Number)
Certified Copies	Certificates of Status
Special Instructions to Fil	ling Officer:

Office Use Only



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J SHIVERS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DEEP SOUTH MOBILE HOME:		
(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Compan	oears on our records.) (y)
The Articles of Organization for this Limited I Florida document number $\frac{L17000015053}{L17000015053}$	1/20/17 and assigned	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company	here:
The new name must be distinguishable and contain the	words "Limited Liability Company," th	ne designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	<u> </u>
(Principal office address MUST BE A STRE	<u> </u>	
		SR J
Enter new mailing address, if applicable:		LO 👊 🚰
(Mailing address MAY BE A POST OFFICE	ORDE	
		<u>SE</u>
B. If amending the registered agent and registered agent and/or the new registered of	Ų.	on our records, enter the name of the new
Name of New Registered Agent:	ROBERT HILL	
New Registered Office Address:	5801 HOLLYWOOD BLVD.	
	Enter i	Florida street address
	HOLLYWOOD	, Florida ³³⁰²¹
	City	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.

Le Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	BELA NAGY	5801 HOLLYWOOD BLVD	
		HOLLYWOOD FL 33021	-
			□ Change
AMBR	ROBERT HILL	5801 HOLLYWOOD BLVD	⊒ Add
		HOLLYWOOD FL 33021	□ Remove
			☐ Change
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ective date,	, if other than the dat	e of filing:				(optional)		
effective date	e is listed, the date must be ite inserted in this block	specific and c	annot be prior t	o date of filing	or more than 90 d				
ument's effe	ective date on the Depar	tment of Sta	te's records.						
				,					
record spe he 90th d	ecifies a delayed ef lay after the record	is filed.	te, but not	an effectiv	e time, at 12	2:U1 a.m.	on the	eariie	er oi
ed	Aug 25 Beleg	·	2017	<u>.</u> . •					

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Typed or printed name of signee

Filing Fee: \$25.00