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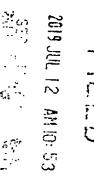
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Reprieve LC Name of Limited Liability Company	
Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Kim Creech Name of Person	
Reprier, LCC Firm/Company	
Firm/Company	
321 Northlake Blyn, Ste. 210	
·	
North Palm Bch FL 33408	
City/State and Zip Code Kim & Represe (: Le com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
,	
Name of Person at (561) 312 - 1144 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
. 1	
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Repriere, LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	vas it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company we Florida document number $L17000212833$.	were filed on $\frac{10 13 17}{}$ and assi	igned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
The new name inust be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.I	C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	me. enter the new name of the limited liability company here: distinguishable and contain the words "Limited Liability Company." the designation "L.L.C." or the abbreviation "L.L.C." al offices address, if applicable: dress MUST BE A STREET ADDRESS) address, if applicable: (AY BE A POST OFFICE BOX) the registered agent and/or registered office address on our records, enter the name of the new address the new registered office address here:	1
•	72	73.8
Enter new mailing address, if applicable:		الاستع
(Mailing address MAY BE A POST OFFICE BOX)	liability company here: Liability Company," the designation "LLC" or the abbreviation "L.L.C." S) ed office address on our records, enter the name of the new shere:	
	A. P.	<u>~~</u>
	<u> </u>	
		of the new
registered agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida strea: address	
	, Florida	
	City Zıp 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 Changing Registered Agent, Signature of New Registered Agent

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	Type of Action
4m312	Jessica Terranora	4370 Gardena Dr.	Add
		Address 4370 Gardena Dr. Palm Beach Garden FC 33+10	☐ Remove
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If an effective date i Note: If the date	if other than the da is listed, the date must be inserted in this bloc ctive date on the Dep	e specific and canno k does not meet t	he applicable stat	f filing or more tha tutory filing requ	option 190 days after fi frements, this c	iling.) Pursuant to	605.0207 isted as
he record spe The 90th da	cifies a delayed or ny after the recor	effective date, d is filed.	but not an e	ffective time,	at 12:01 a.	m. on the ea	rlier of
),	148		2015.				
Dated VI	1 // /						
Dated <u>JU</u>	Jaux	ignature of a memb	······································				-

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Filing Fee: \$25.00