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Florida Department of State

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To:		Ę
	Division of Corporations	<u>, </u>
	Fax Number : (850)617-6383	
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		**
From:	THE ENTERDRICES THE	
	Account Name : ELO ENTERPRISES, INC	~
	Account Number : I20150000109	-
	Phone : (561)544-8862	-
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ESCALADE INVESTMENTS, LLC

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Electronic Filing Menu

Corporate Filing Menu

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S. WARREN

DEC 2 0 2017

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ESCALADE INVESTMENTS LLC					
(Name of the Limite	d Linbility Compa A Florida Limited I	ny as it now appears on inbility Company)	our records.)		
The Articles of Organization for this Limited Lit				and ass	igned
		im.			
This amendment is submitted to amend the follo					
A. If amending name, enter the new name of	the limited liab	ility company here:			
N/A					
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the desig	nution "LLC" or the	abbreviation "L.	L.C."
Enter new principal offices address, if applies	able:	<u>N/A</u>			
(Principal office address MUST BE A STREE		<u> </u>			
		<u> </u>			
		_			
Enter new mailing address, if applicable:		N/A			
(Mailing address MAY BE A POST OFFICE)	ROX)				
(Multing diaress MAX DE A 1 037 017102)	<u> </u>				_
B. If amending the registered agent and/ registered agent and/or the new registered of Name of New Registered Agent:	N/A	<u></u>	· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:		<u> </u>	street address		
		r.nter Flai ida	street aaaress		
		Cin	, Florida	2 in Code	
		•		Lip Coat	
New Registered Agent's Signature, if changing Is I hereby accept the appointment as registered provisions of all statutes relative to the propaccept the obligations of my position as registering filed to merely reflect a change in the company has been notified in writing of this	ed agent and agi er and complete istered agent as registered office	ree to act in this cap a performance of my provided for in Cha	i duties, and 1 a. apter 605, F.S. (m jamuuar wi Or, if this doc	ın ana ument is
	:::2:	t the feet of A	(Clauston of Man	Danistanad Ch	ont .
		inging Registered Agen	i, <u>Signature of New</u>	Recentification of the Control of th	 ;
				<u></u>	(T)

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Mel Corporate Management, Inc	4700 NW Boca Raton Blvd #202	□ Add
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Page 2 of 3

			
 			
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