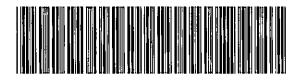


Office Use Only



500320080595

10/29/19--01006--023 *+25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Al sold

BL VORISEK NOV 14 2018

COVER LETTER

	gistration Sec vision of Corp			
ATTO TEXTE		BEERY CRE LLC		
SUBJECT:		Name of Limi	ted Liability Company	
The enclose	d Articles of A	Amendment and fee(s) are subi	nitted for filing.	
Please retur	n all correspor	ndence concerning this matter (to the following:	
		DAVID A. BEERY		
			Name of Person	
			Firm/Company	
		9 SPINNAKER CIRCLE		
			Address	
		SOUTH DAYTONA, FL 3	32119	
			City/State and Zip Code	
		DBEERY0727@GMAIL.C		
		E-mail address: (t	to be used for future annual report notific	cation)
For further	information co	oncerning this matter, please co	all:	
DAVID A. BEERY, CRE		at () Area Code Daytime Telephone Number		
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e following amount:		
\$25.00	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

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

DAVID A. BEERY CRE LLC		
(<u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our re	ecords.)
		∑ ∽ ,
The Articles of Organization for this Limited Liability Compa	any were filed on 27SEPT2018	an tassign e
Florida document number L18000230091		
This amendment is submitted to amend the following:		29 AM SSEE, F
A. If amending name, enter the new name of the limited !	iability company here:	
DAVID A. BEERY LLC		<u> </u>
The new name must be distinguishable and contain the words "Limited Li	iability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NOT APPLICABLE	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NOT APPLICABLE	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l		cords, enter the name of the new
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street a	address
		Florida
	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.

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			☐ Remove
			□ Change
			Add
			Remove
			Change
			□ Remove
			Change
			Remove
			☐ Change
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			Channa Channa

		
		-
	25OCT2018	
<u>iote:</u> If the dat	if other than the date of filing: It is listed, the date must be specific and cannot be prior to date of filing the inserted in this block does not meet the applicable statuto ective date on the Department of State's records.	(optional) ing or more than 90 days after filing.) Pursuant to 605.0207 ry filing requirements, this date will not be listed as
e record spe The 90th d	ecifies a delayed effective date, but not an effec ay after the record is filed.	ctive time, at 12:01 a.m. on the earlier of
25OCT2	018	
<u></u>		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00