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## **COVER LETTER**

SUBJECT:	YNOT BUI	LDING PSL, LLC		
gonde.cr.	-	Name of Limi	ted Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are subi	nitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		BRANDON V. WOODWA	ARD, ESQ	
		WOODWARD, KELLEY.	Name of Person FULTON & KAPLAN	
		27 SE OCEAN BOULEVA	Firm/Company ARD	
		STUART, FL 34994	Address	
		TONYGROZA@GMAIL.C		
For furth <b>e</b> r i	nformation c	E-mail address: (oncerning this matter, please ca	o be used for future annual report not	ification)
BRANDON	v. woody	VARD, ESQ.	772 497-6544	
	Name o	f Person		ne Telephone Number
Enclosed is	a check for th	ne following amount:		
■ \$25.00 I	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)
	MAIL	ING ADDRESS:	STREET/COUR	IER ADDRESS:

Registration Section Division of Corporations

TO:

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YNOT BUILDING PSL, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our rec Liability Company)	cords.)
The Articles of Organization for this Limited Liability Company	were filed on MARCH 20, 2	2019 and assigned
Florida document number L19000078582		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
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Enter new mailing address, if applicable:		Te 🗻 📶
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		rds, <u>enter the name of the</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	tress
		Florida
New Registered Agent's Signature if changing Registered Agent	City	Zip Code

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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fective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior	to date of filing or n	ore than 90 days after	ional) er filing.) Pu	rsuant t	o 605.0
ote: If the date inserted in this block does not meet the application current's effective date on the Department of State's records.		ig requirements, th	is date wil	l not be	elisted
record specifies a delayed effective date, but not	t an effective	time, at 12:01	a.m. on	the e	arlier
The 90th day after the record is filed.					
SEPTEMBER 4 2019					
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	ESQ	_			_
Signature of a member or autho	minad consecontation	a fa mambar			

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