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SECRETARY OF STATE
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• COVER LETTER

TO: Registration Section Division of Corpo					
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of Ar	nendment and fee(s) are sub-	mitted for filing.			
Please return all correspond	ence concerning this matter	to the following:			
	lenda	Bradish			
	_ hada	Name of Person Brookshire LLC			
	·	Firm/Company			
	8715 CL	Address Court			
		Address		2015 MAY	CP 1274
	lange F	33637 - 3300 City/State and Zip Code	>	MAY AHA	-
	1 1 000	•		388 794 3 88	
	E-mail address: (1	to be used for future annual report notific	cation)	E S	
For further information con-	cerning this matter, please ca			VOIND TATE	(
Name of P	erson	at (813) 294-8 Area Code Daytime	3 1 9 Telephone Number		
Enclosed is a check for the	following amount:				
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &	

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

	oleshine, LC	
(Name of the Limited	Liability Company as it now appears (Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Lial Florida document number 1110008449		o7/32/2011 and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here	:
Linda Bradish LLC		
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		2015 MA
(Mailing address MAY BE A POST OFFICE B	ox)	A See
		m _©
		S T
B. If amending the registered agent and/or registered agent and/or the new registered officers.	r registered office address on c ce address here:	our records, enter the name of the nev
Name of New Registered Agent:	Linda Bradish	
New Registered Office Address:		
	Enter Florido	a street 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

	
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fan effective date, if other than the date of filing: fan effective date is listed, the date must be specific and cannot be prior to date of filing o Note: If the date inserted in this block does not meet the applicable statutory fi document's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	e time, at 12:01 a.m. on the earlier of:
Dated Way 11 2015	
Signature of a member or authorized representat	ive of a member

Page 3 of 3

Filing Fee: \$25.00