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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : TRIPP SCOTT, P.A.

Account Number : 075350000065

Phone

: (954)525-7500

Fax Number

: (954)761-8475

\*\*Enter the email address for this business entity to be used for full: annual report mailings. Enter only one email address please.\*\*

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PARK'N GO OF NEBRASKA, LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	OF NEBRASK				
(Name of the Limited Liability C (A Florida Lin	ompany as it now ap nited Liability Compa	pears on our records.)			
The Articles of Organization for this Limited Liability Com Florida document number <u>L00000014023</u>	pany were filed on	November 14, 2	000 and as	ssigned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	l liability company	y here:			
			. ≌o	CD:	
The new name must be distinguishable and end with the words "Limite	d Liability Company,"	the designation "LLC" or t	he abbreviation	"L.E.C."	
Enter new principal offices address, if applicable:	1040 CR	ESCENT BEACH	ROAD		
(Principal office address MUST BE A STREET ADDRES	1 150	EACH, FL 32963	\$55 \$75	23	y is
			्रें (भेंटा	- <del></del>	
Enter new mailing address, if applicable:			150 150 150 150 150 150 150 150 150 150	<u>=</u>	ŧ.
(Mailing address MAY BE A POST OFFICE BOX)			<b>量性</b> 注	<u> </u>	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		on our records, ent	er the name	of the ne	æ
Name of New Registered Agent:			<del></del>		
New Registered Office Address: 1040 C	RESCENT BE	ACH ROAD Florida street address			
VERO	BEACH		32963		
VEICO	City	, Florida	32963 Zip Code	<del></del>	
New Designand Agentle Cloneture (Caboneine Designand &					

## 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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JOHN R. BONA	1101 ELLER DRIVE	🖸 Add
		FORT LAUDERDALE, FL 33316	■ Remove
MGR	CAROL L. BONA	1101 ELLER DRIVE	TO Add
		FORT LAUDERDALE, FL 33316	Remove
			23 AT
MGR	PNG SPE AT NEBRASKA, INC.	1040 CRESCENT BEACH ROAD	177 U)
		VERO BEACH, FL 32963	□ Remove
			Add
			Remove
		•	
			Remove
<u></u>			Add
	·		Remove

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AR	ARTICLE IV		
	MANAGEMENT		
The	e limited liability company is to be managed by its manager(s), and		
ls t	therefore a manager managed company.		
Effective of	date, if other than the date of filing: (optional)		
(The effective	date, if other than the date of filing:  (optional)  we date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after is document is filed by the Florida Department of State)  Sept 23, 2014		
(The effective the date this	we date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after is document is filed by the Florida Department of State)  Sept 23, 2014  Ly Ane R. Burney My.	S <sub>S</sub>	201
(The effective the date this	ve date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after is document is filed by the Florida Department of State)	SECRE	2011 年

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