Division of Corporations

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:		<u>:</u>	- <u></u>	
	Division of Corporations	• •	<u></u> <u>+</u>	-
	Fax Number : (850)617-6383	741.7	ræ.	•
From:			t C	-
	Account Name : BUCHANAN INGERSOLL & ROONEY : Account Number : I19990000148	PC - TAM	1PA OFFI	Ci
	Phone : (813)769-7692		عن ا	
	Fax Number : (813)223-6121	No		
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Electronic Filing Menu

Corporate Filing Menu

Help

Fax Audit #H180001782563

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

M IAMPA, L.L.C.		
Ciame of the L	mited Liability Company as it apw (A Florida Limited Liability Com	apprara on our records.) pany)
The Articles of Organization for this Limited	on June 11, 2001 and assigned	
Florida document number L01000009590		
This amendment is submitted to amend the fo	ollowing:	
A. If amending name, enter the new name	of the limited liability compa	nny here:
The new name must be distinguishable and contain the	words "Limited Liability Company,	"the designation "LLC" or the abbreviation "LL.C."
Enter new principal offices address, if app		
Principal office address MUST BE A STRI	ET ADDRESS)	1. 2.
		Pro-
Coter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE ROX)		
		
	d/or registered office addres	<u> </u>
Name of New Registered Agent:		
New Registered Office Address:	401 East Jackson Street, Suit	± 2400
	Ente	r Florida street address
	Tampa	, Florida 33602
•	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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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 = Manager

AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	Francis, L.L.C.	14824 North Florida Avenue	■ Add
	•	Tampa, FL 33613	□ Remove
			Change
MGR	Timothy F. Mobley	14824 North Florids Avenue	
		Tampa, FL 33613	🗀 Кеточе
			☐ Change
MGR	Timothy M. Hohl	14824 North Florida Avenue	
		Tampa, FL 33613	В Келлоче
			☐ Change
MGR	Jamie Goodman	14824 North Florida Avenue	
		Tampa, FL 33613	■ Remove
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Effective date, if other than the date of filing: f an effective date is listed, the date must be specific and cannot be properties. If the date inserted in this block does not meet the appropriate of State's record document's effective date on the Department of State's record.	กเผมาเกรา	of filing or latutory fili	more than 9 ng require	(option 0 days after fil ments, this d	al) ing.) Pursuac ate will not	et to 605.0 be listed	7207 S a.a 1
ne record specifies a delayed effective date, but the Poth day after the record is filed.	not an o	effective	time, at	12:01 a.r	n. on the	earlier	of:
Dated 12 , 2018	T .						
Dated June 12 2018 Signature of a member of an	utborized n	epresentativ	of a mem	oer .			

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Filing Fee: \$25,00