## L02000027273

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	<u>  </u>
(Submission Emily Hame)	
(Document Number)	ii -
Certified Copies Certificates of	Status
Special Instructions to Filing Officer:	

Office Use Only



500303409755

09/15/17--01007--001 \*\*25.00

17 SEP 15 811 8:49

\$22.1 .7.7 Y.C. . . .

## **COVER LETTER**

	Registration Se Division of Co			
SUBJEC	Casa Loma	Holdings LLC		
SUBJEC	·	Name o	f Limited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) ar	e submitted for filing.	
Please reti	urn all correspo	ondence concerning this m	atter to the following:	
		David C Koch, Trusto	ee	
			Name of Person	
		Casa Loma Holdings	LLC	
			Firm/Company	
		PO Box 542307		
			Address	
		Merritt Island, FL 329	954-2307	
			City/State and Zip Code	
		casalomaholdings@gn		
For further	r information c	e-man addr 	ess: (to be used for future annual report noti ase call:	fication)
David Ko	ch		321 258-5503	
Name of Person		Person		e Telephone Number
Enclosed i	s a check for th	e following amount:		
\$25.00	) Filing Fee	□ \$30.00 Filing Fee & Certificate of Statu		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (udditional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ation Section n of Corporations x 6327	STREET/COURL Registration Section Division of Corport Clifton Building 2661 Executive Cer Tallahassee, FL 32	n ations nter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Casa Loma Holdings ELC		
(Name of the Lin	nited Liability Company as it now appears on our records.) 	
j	(A Florida Limited Liability Company)	
The Articles of Organization for this Limited	Liability Company were filed on October 15, 2002	
	Liability Company were filed on	and assigned
Florida document number L02000027273		
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability company here:	
The new paper must be distinguishable and accraig the	words "Limited Liability Company," the designation "LLC" or the abb	<del></del>
The new name must be distinguishable and contain the	words "Limited Liability Company. The designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if appl	  icable:	
(Principal office address MUST BE A STRE	EFT ADDRESS)	
		<del></del>
	<del></del>	
Enter new mailing address, if applicable:		4
•••		
(Mailing address MAY BE A POST OFFICE	<u> </u>	
		<u>,                                     </u>
		<u>(1)</u>
B. If amending the registered agent and	il d/or registered office address on our records, <u>enter tl</u>	ie name of the ne
registered agent and/or the new registered of	office address here:	Ţ.
,		<u> </u>
Name of Naw Davistand Assault		- v
Name of New Registered Agent:		<u></u>
New Registered Office Address:		
	Enter Florida street address	
	Florida	·- <u>-</u>
	City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	
Thereby accept the appointment as register	 ed agent and agree to act in this capacity. I further agre	man de la Callada
provisions of all statutes relative to the pro-	of agent and agree to act in this capacity. I further agre fer and complete performance of my duties, and I am fai	e to comply with the
accept the obligations of my position as rea	istered agent as provided for in Chapter 605, F.S. Or, if	nutar wun ana Tibio dominiote lo
being filed to merely reflect a change in the	registered office address, I hereby confirm that the limit	uns aocument is wal liakilin
company has been notified in writing of this	у спатов однос аска съз. 1 ноголу сопринг ика то ита 8 chanoe	<i>ча навниу</i>
, , , , , , , , , , , , , , , , , , ,	1	
	If Changing Registered Agent, Signature of New Regis	tered 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 = Manager AMBR = Authorized Member <u>Title</u> Name Address Type of Action MGRM Marcy P. Johnson 4948 Patricia Street 🗃 Add Cocoa, FL 32927 ☐ Remove ☐ Change □ Add \_□ Remove ☐ Change \_ 🗆 Add □ Remove ☐ Change □ Add ☐ Remove ☑ Change □ Add ☐ Remove □ Change □ Add □ Remove

☐ Change

mending any other information, o	  -   nter change(s)	here: (Attach	additional sh	eets if neces	sarv)	
•		Tere (mile)	acidinona, in	ceis, y neces	301 V.)	
			·		<del></del>	
	<u> </u>			<del></del>		
		-				
	<u>                                     </u>					
	<u> </u>					
<del></del>				_		
				- <del></del>		_ <del></del>
				<u> </u>		
	<u> </u>					<del>_</del>
		·				
		_				
	<u>  </u>	<del></del>				
					-	7 5
						~; ~
ctive date, if other than the date of effective date is listed, the date must be spe	f filing:	nrior to date of fili	ing or more than !	(option	al)	
E If the date inserted in this block document's effective date on the Department.	s not meet the ap	oplicable statutoi	ry filing require	ements, this d	ate'will r	not be listed
anent's creetive date of the Departify	III OI State s rece	nus.			7	4." 5"- 1.0
ecord specifies a delayed effec	 tive date, but	: not an effec	ctive time, a	t 12:01 a.r	n. on tl	he earliei
e 90th day after the record is	filed.					
, September 10	2017					
d september 10	+	1	_			
" Laure	(c 4			_		
Signatu	re of a member or a	uthorized represe	entative of a men	ber		
David C. Koch, Trustee						
	Typed or p	rinted name of sig	gnee			<del></del> _
	P	age 3 of 3				