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SECRETARY OF STATE ALLAHASSEE, FLORIDA 2015 AUG 31 P 3



COVER LETTER

TO: Registration Division of C	n Section Corporations		
	L, L.L.C.		
SUBJECT:	Name of Limited Liability Company	_	
	s of Amendment and fee(s) are submitted for filing. espondence concerning this matter to the following:		
	Michael J. Faehner		
	Name of Person		
	M FAEHNER ESQ LLC		
	Firm/Company	_	
	600 BYPASS DRIVE, SUITE 100		
	Address		
	CLEARWATER, FL 33764		
	City/State and Zip Code	_	
	FILINGS@MFAEHNER.COM E-mail address: (to be used for future annual report notification)	_	
	·		
For further informatio	on concerning this matter, please call:	-1	
MICHAEL FAEHNE	ER 727 443 5190 at ()	2018 SEC	
Nam	ne of Person Area Code Daytime Telephone Numb	2015 AUG 31 SECRETARY ALLAHASSEI	
Enclosed is a check for	or the following amount:	11 15 15 15 15 15 15 15 15 15 15 15 15 1	m
\$25.00 Filing Fee	Certificate of Status Certified Copy Certifications (additional copy is enclosed) Certifications (additional copy is enclosed)	Filing Fee, cicate of Status & ed Copy onal copy is enclosed)	D

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

ROVAL, L.L.C.			
(Name of the Limi	ted Liability Compa (A Florida Limited	any as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited L	iability Company	were filed on 12/09/2002	and assigned
Florida document number L02000032992	·		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited liab	pility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		36 BAHAMA CIRCLE	
(Principal office address MUST BE A STREET ADDRESS)		TAMPA, FL 33606	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of	or registered o		SECRETARY OF STATES FLORIDS The name of the ne
Name of New Registered Agent:	WICHAEL J. I	TAERINEK, ESQ	
New Registered Office Address:	600 BYPASS I	DRIVE, SUITE 100	
		Enter Florida street	t address
	CLEARWATE		, 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

Page 1 of 3

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>	<u>Name</u>	Address	Type of Action
MGR	RODRIGUEZ, ESTHER G	36 BAHAMA CIRCLE	≅ Add
		TAMPA, FL 33606	□ Remove
			Change
MGRM	RODRIGUEZ, ESTHER G	36 BAHAMA CIRCLE	
		TAMPA, FL 33606	■ Remove
			Change
			Add
			□ Remove
			Change
			ECRETA LAHAS
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			Add
			☐ Remove
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Effect	ive date, if other than the date of filing: (optional)
(If an eff	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be a second or secon
	ent's effective date on the Department of State's records.
. مد معلم	HASA HASA HASA HASA HASA HASA HASA HASA
) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. in the earlier of: 90th day after the record is filed.
Dated	Total Solution of the second o
	Signature of a member or authorized representative of a member
	ESTHER RODRIGUEZ
	Typed or printed name of signee

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Filing Fee: \$25.00