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SECRETARY OF STATE

COVER LETTER

то:	Registration Section Division of Corporations	
SUBJE	CT: Debra Grandahl, LLC Name of Limited Liability Company	
The end	losed Articles of Amendment and fee(s) are submitted for filing.	
Please i	eturn all correspondence concerning this matter to the following:	
	Debra Denshue Name of Person	
	Firm/Company	
	3685 Bee Ridge Road	
	Sarasote, FL 34233 City/State and Zip Code	
	E-mail address: (to be used for flutre annual report notification)	
For furt	ner information concerning this matter, please call:	
De	Name of Person at (G41) 3710 - 4915 Area Code & Daytime Telephone Number	
Enclose	is a check for the following amount:	
\$2 5.	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

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

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 \mathbf{OF} SECRETARY OF STATE lity Company as it now appears on our records. AHASSFF FI Florida document number 1030000 29820 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Sehra Ann Donohue The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Debra Ann Donohua Name of New Registered Agent: New Registered Office Address: 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 698, 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

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

MGR = Manager MGRM = Managing Member Title **Type of Action** <u>Name</u> **Address** MERM Debra Ann Donohue Remove ☐ Add Remove Remove \square Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Filing Fee: \$25.00