L050000 05167

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Čit	ty/State/Zip/Phon	e #)
□ BICK HB	☐ WAIT	MAIL
		NATE
(Bu	isiness Entity Nar	me)
(Do	cument Number))
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
'	J	





500306905695

12/28/17--01021--003 ++25.00

SECULIATION NO SECULIATION OF PHONE 30

COVER LETTER

	gistration Se vision of Cor			
CHRICCT.	Meyer Inte			
SUBJECT			ited Liability Company	
The enclose	ed Articles of .	Amendment and fec(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		Klaus Meyer		
			Name of Person	
			Firm/Company	
		6310 Barbara Street		
			Address	, , , <u>, , , , , , , , , , , , , , , , </u>
		Jupiter, FL 33458		
			City/State and Zip Code	
		klausitomeyer@gmail.com	16.6	
For further i	information co	oncerning this matter, please ca	to be used for future annual report no all:	outication)
Jason Marc	: Altman		561 733-5300 at ()	
	Name of	f Person	Area Code Dayti	me Telephone Number
Enclosed is	a check for th	e following amount:		
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & 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 OF

(Name of the Limithe Articles of Organization for this Limited Laborida document number L05000005107 This amendment is submitted to amend the following name, enter the new name of the laborida of the labor	iability Company v	ny as it now appears on o iability Company) were filed on		and assigned	.== / d
lorida document number L05000005107 his amendment is submitted to amend the following	owing:	were filed on 1/14/200	05	and assigned	•
lorida document number L05000005107 his amendment is submitted to amend the following	owing:				G:
	•				
. If amending name, enter the new name o	of the limited liabil				
	a the nimited hapi	lity company here:			
he new name must be distinguishable and contain the v	vords "Limited Liabili	ity Company," the designa	tion "LLC" or the abb	reviation "L.L.C."	
nter new principal offices address, if applic	cable:				
Principal office address MUST BE A STREE	ET ADDRESS)				—
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	2195 StEAMbe	VALDIS DAT Spri	SERE Nas C	<u>C.</u> 'n . <u>o</u>
. If amending the registered agent and egistered agent and/or the new registered o			records, enter t	he name of th	<u>1e</u> n <u>ev</u>
Name of New Registered Agent:	Jason Marc Altır	nan, CPA			
New Registered Office Address:	1880 N Congress	s Avenue Suite 307			
		Enter Florida str	eet address		
	Boynton Beach		, Florida <u>334.</u>	26	
ew Registered Agent's Signature, if changing l		City		Zip Code	

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.

1/Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			Add
			П Remove
			☐ Change
			□ Remove
			Change
			D Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
	_		
			□ Remove
			☐ Change
	-		Add
			Remove
			□ Change

•			
		7	
		<u></u>	
		22	•
		<u> </u>	
			· '.
n etfecti	date, if other than the date of filing:	ifter filing.) Pursuant to 605	
	's effective date on the Department of State's records.	tins date will not be fish	cu i
	od specifies a delayed effective date, but not an effective time, at 12:00 Oth day after the record is filed.	1 a.m. on the earlie	er (
ted	12-14 2017		
	Signature of a member or authorized representative of a member		

Page 3 of 3

Filing Fee: \$25.00