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Special Instructions to F	iling Officer:	
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### **COVER LETTER**

TO: Registration Sec Division of Cor			
SUBJECT:	eytow + A Name of Lim	SM+YW, LLC ited Liability Company	<u></u>
The enclosed Articles of a	Amendment and fec(s) are sub	unitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Sean	De Pasquale Name of Person	<del>-</del>
	Peyton -	+ Ashtyw, L	LC
	149 Sa	ud Pine D. Address	<u> </u>
	Jupiter Seand. E-mail address: (	City/State and Zip Code  Florida @ a M  to be used for future annual report notifi	177 a1/- com
For further information co	oncerning this matter, please ca	atl:	
Sean Do	epasquale Person	at ( <u>S6/</u> ) 777 Area Code Daytime	CO79 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)	□ \$60.00 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

Peyton + Ashtyn, LLC	
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on \( \frac{12412005}{2412005} \) and assigned Florida document number \( \frac{1050000723}{2} \)	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.C." 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 registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Florida	new
City: X.ip 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

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	Name	Address	Type of Action
<u>tmBR</u>	Russ Stewart	693 Key Royale Dr. Holmes Beach, FL 34217	□ Add
		7, 10	Remove
			Change
			🗆 Add
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earlier	12:01 a.m. on the
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	days after filing.) Pursuant nents, this date will not

Page 3 of 3

Filing Fee: \$25.00