

LD5000047555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

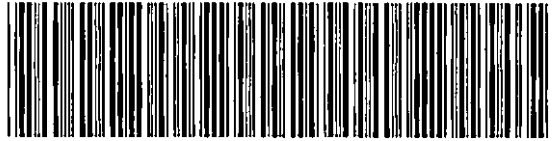
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O SIMMONS
SEP 10 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Aragorn Group, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kristina Hudson, Esq.
Name of Person

Booth & Cook, P.A.
Firm/Company

7510 Ridge Road
Address

Port Richey, Florida 34609
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristina Hudson at (727) 842-9105
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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**

Aragorn Group, 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 05/13/2005 and assigned
Florida document number L05000047555

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.L.C." or the abbreviation "L.C.C."

Enter new principal offices address, if applicable:

4504 Parkway Boulevard

(Principal office address MUST BE A STREET ADDRESS)

Land O' Lakes, Florida 34639

Enter new mailing address, if applicable:

4504 Parkway Boulevard

(Mailing address MAY BE A POST OFFICE BOX)

Land O' Lakes, Florida 34639

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:

Name of New Registered Agent:

John D. Inhofer

New Registered Office Address:

4504 Parkway Boulevard

Enter Florida street address

Land O' Lakes

City

Florida 34639

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

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	Michael L. Thorpe	25324 Withrow Road	<input type="checkbox"/> Add
		Brooksville, Florida 34601	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Kathryn N. Thorpe	25324 Withrow Road	<input type="checkbox"/> Add
		Brooksville, Florida 34601	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Aaron Inhofer	4504 Parkway Boulevard	<input checked="" type="checkbox"/> Add
		Land O' Lakes, Florida 34639	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	John D. Inhofer	4504 Parkway Boulevard	<input type="checkbox"/> Add
		Land O' Lakes, Florida 34639	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Sharon K. Inhofer	4504 Parkway Boulevard	<input type="checkbox"/> Add
		Land O' Lakes, Florida 34639	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective 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 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated August 31 , 2018

Aaron Inhofer
Signature of a member or authorized representative of a member

AARON Inhofer
Typed or printed name of signer