105000047555

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SECRETARY SERVICES

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COVER LETTER

TO:

Registration Section

Division of Cor	porations		
Aragorn Gr	roup, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The control Addition of	\$ d \$ d &(-) sb.	inad Ca- Clina	
The enclosed Afficies of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence 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 3460 ^c)	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca	all:	
Kristina Hudson		727 842-9105	
Name of Person		at () Area Code Daytime	Yalashara Number
Name o	i i cison	Alea Code Daytille	t rereprone runnier
Enclosed is a check for th	ne 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)
Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURI Registration Sectio Division of Corpor Clifton Building	n
	issee, FL 32314	2661 Executive Ce	nter Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Aragom Group, LLC						
Name of the Limi	ted Liability Compa	any as it now appears Tiability Company)	on our records.			
	iability Company					
This amendment is submitted to amend the foll	owing:		7 18			
A. If amending name, enter the new name o	In the number L05000047555 In it is submitted to amend the following: In it is submitted to amend the follow					
The new name must be distinguishable and contain the w	vords "Limited Liabi	lity Company," the de	signation "LLC" or the abbreviation "L.E.C."			
Enter new principal offices address, if applic	able:	4504 Parkway Be	oulevard 32			
(Principal office address MUST BE A STREE	T ADDRESS)	Land O' Lakes, F	lorida 34639			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) P. If amounting the registered agent and/or registered of		Land O' Lakes, Florida 34639				
			out records, enter the name or the new			
Name of New Registered Agent:	John D. Inhofer	г				
New Revistered Office Address:	4504 Parkway I	Boulevard				
ren registered errore radiress.	Enter Florida street address					
	Land O' Lakes		Florida 34639			
		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

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>	Type of Action
MGRM	Michael L. Thorpe	25324 Withrow Road	□ Add
		Brooksville, Florida 34601	
		- 11	⊟ Remove
			Change
MGRM	Kathryn N. Thorpe	25324 Withrow Road	
		Brooksville, Florida 34601	■ Remove
			Change
MGR	Aaron Inhofer	4504 Parkway Boulevard	_
			B Add
		Land O' Lakes, Florida 34639	☐ Remove
			☐ Change
MGRM	John D. Inhofer	4504 Parkway Boulevard	
 			
		Land O' Lakes, Florida 34639	Remove
			Change
MGRM	Sharon K. Inhofer	4504 Parkway Boulevard	
			God d
		Land O' Lakes, Florida 34639	Remove
			Change
			27.
			Add 26
			□ Remove
			□ Chance

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Effect	tive date, if other than the	date of filir	ng:			(optio	nal)	
(If an ef	tive date, if other than the fective date is listed, the date mus. If the date inserted in this blo	be specific an	id cannot be pr	ior to date of fi	ling or more tha	n 90 days after fi	ling.) Pursuant to 605	.0201
docum	nent's effective date on the De	partment of	State's recor	ds.	ory minig requ	nements, this t	iate will not be liste	u as
	cord specifies a delayed			not an effe	ctive time,	at 12:01 a.	m. on the earlie	er o
) The	90th day after the reco	ord is filed	•					
	D. 24 21		2018					
	<u>F10,051 21</u>		. 2010	·				
Dated	V							
Dated	August 31 acm	ly.	.h.					

Page 3 of 3

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