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COVER LETTÉR

TO: Registration Section Division of Corporations
SUBJECT: DEMEZ POSTING 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:
TSAAC Senez_ Name of Person
Genez Booting, LAC
1060 E. Industrial Dr. Sute 4.
Orange City FC 32763 Chy/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ISAAC Senez at 386, 804-8165
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee. \$\Bigcup \$
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 MAILING ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION

2017 JUL 31 PM 1: 62

(A Florida Limited I	lability Company)	OSCE, FI ORIA
The Articles of Organization for this Limited Liability Company	were filed on 1-20-2006	
Florida document number <u>L0600007225</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
NIA	•	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	NA	
(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 of registered agent and/or the new registered office address here		the name of the ne
Name of New Registered Agent:	Ms	
New Registered Office Address:	·	
	Enter Florida street address	
	, Florida	
	Cih	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as period to merely reflect a change in the registered office	performance of my duties, and I am foorovided for in Chapter 605, F.S. Or,	miliar with and If this document is

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

company has been notified in writing of this change.

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 = M $AMBR = A$	anager uthorized Member	!		
<u>Title</u>	Name	<u>Address</u>		Type of Action
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	ending any other information, enter change(s) here: (Attach add	utional sneets, if necessary.)
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fan eff <u>Note:</u>	fective date is listed, the date must be specific and cannot be prior to date of filing of the date inserted in this block does not meet the applicable statutory from the offsetive date on the Department of State of specific	or more than 90 days after filing.) Pursuant to 605.0207 (iling requirements, this date will not be listed as the
.ocum	nent's effective date on the Department of State's records.	
a ra	cord specifies a delayed effective date, but not an effective	re time, at 12:01 a.m. on the earlier of:
	e 90th day after the record is filed.	e time, at 12.01 a.m. on the earner of.
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	1-14-7-10	
Dated	1-28-2017	
Dated	(20)	
Dated	G. Grand Der	
Dated	Signature of a member or authorized representa	tive of a member
Dated	G. Grand Der	tive of a member
Dated	G. Grand Der	
Dated	Signature of a member or authorized representation of the Senez Se.	

Filing Fee: \$25.00