L06000056597

(Requestor's Name)	
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PICK-UP WAIT	MAIL
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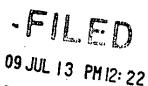
TO:	Registration Sect Division of Corpo			·
SUBJI	ECT:	Name of Limite	CHAPEL, LLC ed Liability Company	
The en	closed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please	return all correspond	dence concerning this matter t	to the following:	
		Joseph 1	D. Farish, Jr., Esqui	re
		Law Office of Jo	oseph D. Farish, Jr.	LLC
P.O. Box 4118				
	•		Address	
		West Palm Bea	ch, Florida 33402	
		-	City/State and Zip Code	
	N	lone	be used for future annual report notificat	· · · · · · · · · · · · · · · · · · ·
For fur	ther information cor	ncerning this matter, please ca	·	ion)
Jos	seph D. Fari Name of F	sh, Jr., Esquire	at (561) 659-350 Area Code & Daytime T	
Enclos	ed is a check for the	following amount:		
\$25	5.00 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



BOYNTON N	ATIONAL CHAPEL, LLC	TALLAD	ARY OF STATE
(Name of the Limited Li (A F)	ATIONAL CHAPEL, LLC ability Company as it now appea orida Limited Liability Company)	<u>irs on our tecoru</u>	SEE FLORIDA
The Articles of Organization for this Limited Liab			
Florida document number <u>L06000056597</u>			
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	ne limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Comp	any," the designal	tion "LLC" or the abbreviation
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET.	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
			_
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>er</u>	nter the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	···	, Floric	da
	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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
MGR	Michael D. I	Enkoff	10055 Heritage Blvd. Lake Worth, Florida 33467	Add X Remove
MGR	Joseph D. F	arish, Jr.	316 Banyan Blvd. West Palm Beach, Florida 33401	K Add ☐ Remove
				Add Remove
				Add Remove
				AddRemove
				AddRemove
D. If ame	ending any other informa	tion, enter change	e(s) here: (Attach additional sheets, if necessa	
- - -				FILED 09 JUL 13 PH 12: 22 15ECRETARY OF STATE 15ECRETARY OF STATE
Dated	July 10	, <u>200</u>	9 / 3 1 / 1	TATE ORIDA
	Sie	nature of a member	or authorized representative of a member	
	512		Farish, Jr.	
		_	or printed name of signee	·

Page 2 of 2

Filing Fee: \$25.00