L07000001095

(Re	questor's Name)		
(Ad	ldress)		
(Ad	ldress)	<u>.</u>	
(Cit	ty/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Ви	isiness Entity Namo	e)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		





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COVER LETTER

TO: Registration Division of C				
SUBJECT:	Green Wo	of Graip LLC ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corre	spondence concerning this matter	to the following:		
	Frederi Green 1	Name of Person	<u> </u>	
	5904 S	rust Grap LLC Firm/Company outh Himes A	lenje	(new address)
	Tam	Address .pa, FL 33611		
	_	Pa, FL 33611 City/State and Zip Code bormer@aol. to be used for future annual report notifi		
For further information	on concerning this matter, please c	all:		
F. Jay	Burmer ne of Person	at (813) GO - G	7888 Telephone Number	
Enclosed is a check for	or the following amount:			
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &

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

TO ARTICLES OF ORGANIZATION OF

Green Wolf Gr	orp LLC				
(Name of the Limited Liability Compa (A Florida Limited)	any as it now appear Liability Company)	s on our records.)			
The Articles of Organization for this Limited Liability Company Florida document number 6700007095	were filed on	1/19/200	1	and ass	igned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :			
The new name must be distinguishable and contain the words "Limited Liabi	lier Commons 9 the d	nianation (II I C)	- th	intinu 4T T	
	my Company, me de	signation LLC 0		anion L.i	yr.
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		سوورا مسرور مسرور	AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I
(Principal office address MUST BE A STREET ADDRESS)			2022 2022 1024	<u></u> <u></u>	
		<u> </u>	_ ```````	ט	<u> </u>
			STAT	ů	
Enter new mailing address, if applicable:			음취-	2	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	··· · · · · · · · · · · · · · · · · ·			
				·	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records,	enter the	name (of the new
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Flor	da street address			
		, Flori			
	City		2	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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
<u>mgr</u>	Linda Rose Burmer	5904 South Himes Avenue Tampe, FL 33611	MAdd
	Burmer	Tampa, FL 33611	□ Remove
			Change
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			Remove
			Change
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			□ Remove
			☐ Change
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7 Effect	tive date, if other than the date of filing: (optional)	
J. ISTRUCT	ffective 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 605.0	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	d as the
docun	nent's effective date on the Department of State's records.	
if the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie	r of:
	e 90th day after the record is filed.	. •
,		
	_ June 11th, 2016	
Dated	June 11", 2016	
Duitu		
	Signature of a member or authorized representative of a member	
	FREDERICK JAY BURMER # = =	
	TS IS	
	Page 3 of 3	

Filing Fee: \$25.00