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Amend

JUN 1 1 2020 LALPRITTON

COVER LETTER

	TO: Registration Section Division of Corporations			
SUBJEC	CT:	GREEN WOLF	CRO-PLLC	
		Name of Lir	nited Liability Company	
-				
The encle	osed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please re	turn all correspo	ondence concerning this matter	r to the following:	
		FRE DE 21	CK JAY BURNER	
			Name of Person	
		GREEN	walf group lic	
			Firm/Company	
		15951 CAPE 1	CURAL DRIVE	
		·	Address	
		wim AUM	A FLORIDA 3359	i q
			City/State and Zip Code	
		S j	burmer @ aclican	
			to be used for future annual report notifi-	cation)
For furthe	er information co	oncerning this matter, please c	all:	
FREDE	RICK JAY	BURNER	at (813) 600 - C	1833
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	e following amount:		
\$2 5.0	0 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)
	<u>Mailing Address</u> Registration S		Street Address:	
	Division of Co		Registration Sect Division of Corpo	
þ	P.O. Box 6327	7	The Centre of Ta	llahassee
7	Tallahassee, F	L 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ROUP LLC	
(<u>Name of the Limited Liability Co</u> (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	···
The Articles of Organization for this Limited Liability Compa Florida document number <u>Lの7coのでの1e45</u>	ny were filed on 1/19/2007	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		70
		7 7 71
		Van der der
Enter new mailing address, if applicable:		23 17
Mailing address MAY BE A POST OFFICE BOX)		32 0
		. 0
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	e address on our records, <u>enter the nar</u>	ne of the new register
and the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 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>	Address	Type of Action
MGR	JULIAN H. BURMER	15951 Cape (eral Dr.	
		Wimauma, FL 33598	X Remove
			□Change
MGR	JUSTIN F. BURMER	5904 S Himes Ave.	⊠ ∕Add
	Tampa, FL 3:3611	□Remove	
			□Change
		□Remove	
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Effectiv If an effec	te date, if other than the date of filing:
HOLE. 1	i die date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docume	nt's effective date on the Department of State's records.
e recora rd is file	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
Dated	5/22/20
_	
	Signature of a member or authorized representative of a member
	SOCIAL 200 MAY DIRECT
	FREVERICK JAY BURMER Typed or printed name of signee