L070000 32521

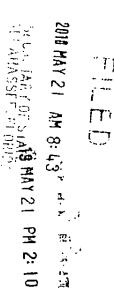
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100313296741

05/21/18--01003--017 ++30.00



B FIGUEROA MAY 22 2018

TO:

COVER LETTER

TO:	Registration Se Division of Cor						
	S&G, LLC						
SUBJI	ECT:	Name of Lim	ited Liability Company				
The en	nclosed Articles of .	Amendment and fee(s) are sub	mitted for tiling.				
Please	return all correspo	ndence concerning this matter	to the following:				
		John Lockwood					
			Name of Person				
	The Lockwood Law Firm Firm/Company 106 East College Avenue, Suite 810						
	Address						
		Tallahassee, Florida 32301	l .				
		City/State and Zip Code john@lockwoodlawfirm.com					
		E-mail address: (to be used for future annual report notifi	ication)			
For fu	rther information co	oncerning this matter, please co	all:				
John I	Lockwood		850 727-5009 at ()				
	Name o	l'Person	at () Area Code Daytime	Telephone Number			
Enclos	sed is a check for th	ne following amount:					
□ \$2	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

S&G,LLC(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on and assigned L07000032521 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: MME Horida, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C." 106 East College Avenue, Suite 810 Enter new principal offices address, if applicable: Tallahassee, Florida 32301 (Principal office address MUST BE A STREET ADDRESS) 106 East College Avenue, Suite 810 Enter new mailing address, if applicable: Tallahassee, Florida 32301 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the nanie of the new registered agent and/or the new registered office address here: John Lockwood Name of New Registered Agent: 106 East College Avenue, Suite 810 New Registered Office Address: Enter Florida street address , Florida <u>-</u> 32312 Tallahassee

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.

Cuv

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>	Address	Type of Action
MGR	Adam Bierman	10115 Jefferson Blvd.	_ ≅ Add
		Culver City, 90232	
			☐ Change
MGR	George F. Grimsley	1427 Piedmont Drive E.	Add
		Tallahassee, Florida 32308	■ Remove
			☐ Change
MGR	Susan E. Grimsley	1427 Predmont Drive E.	□ Add
		Tallahassee, Florida 32308	■ Remove
			Change
			Remove
			Change
			□ Remove
			Change
			🗆 Add
			Remove
			□ Change

	-	
		
	<u> </u>	
		2018
		TAY 2
		- SSA
		TO A
		8: 4: 3
		W
ffective date, if other than t	e date of filing:	(optional)
Note: If the date inserted in this	ust be specific and cannot be prior to date of filing or r block does not meet the applicable statutory filing	nore than 90 days after filing.) Pursuant to 605.0207 ng requirements, this date will not be listed as
locument's effective date on the	repartment of State's records.	
e record specifies a delay	ed effective date, but not an effective	time, at 12:01 a.m. on the earlier o
The 90th day after the re	cord is filed.	
May 21 Dated	2018	
	 -·	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00