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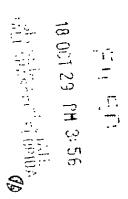
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COVER LETTER

Division of Cor			
SUBJECT: Com.	morcial Equity	Part of LLC ited Liability Company	
	Name of Limi	неа Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
	.),	Name of Person	
		Name of Person	
	Conmocial	Eguity Pertners	
	1971 Lec Ro	1 Suite 200 Address	
	Winter Park	FL 327 City/State and Zip Code	8 9
	Jim. gush E-mail address: (1	o be used for future annual report noting	oK.com
For further information c	oncerning this matter, please ca	dl:	
Jim C	SUSTNER f Person	at (407) 405 ·	-0522 e Telephone Number
		·	•
Enclosed is a check for the	he following amount:		
S25.00 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**

(Name of the Limited Liability Compan	Partners LLC
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) lability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L 07000118799</u> .	were filed on $11/28/2007$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here.	fice address on our records, enter the name of the new:
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 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
MGRM	Brian Smith	5116 Maxon Terrace	Add
		Sun 6-d, FL 32771	□ Remove
	Change From MG	R to MGRM and also address	⊠ Change
			Add
			□ Remove
			Change
<u>MGR</u> M	Greg Kunz	4595 Beach Blod	_ Д . ∧dd
		Orlando, FL 32863	cn
		<u></u>	Change Add Remove
		1. 2. 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	Remove
		8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	□ Change
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Sective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of ote: If the date inserted in this block does not meet the applicable statucument's effective date on the Department of State's records.	(optional) filing or more than 90 days after filing.) Pursuant to 605	
record enecifies a delayed affective date, but not an off	ective time, at 12:01 a.m. on the earlie	er c
The 90th day after the record is filed. Signatura is member or authorized repr		

Page 3 of 3

Filing Fee: \$25.00