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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: TAVISTOCK DEVELOPMENT Account Name

Account Number : I20170000084 : (407)909-9957 Phone : (407)909-9957 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

 Address		

LLC AMND/RESTATE/CORRECT OR M/MG RESIGNE 827 COMMUNICATIONS, LLC

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## COVER LETTER . . .

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	distration Sedision of Corp			
SUBJECT:	827 Commu	unications, LLC		
SOBJECT.		Name of Limi	ted Liability Company	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
The enclosed	i Articles of .	Amendment and fee(s) are sub-	nitted for filing.	
Please retuir	all correspo	ndence concerning this matter	to the following:	
		Michelle Dadisman		
			Name of Person	·
		Tavistock Financial, LLC		
			Firm/Company	
		9350 Conroy Windermere	Road	
			Address	
		Windermere, FL 34786		
			City/State and Zip Code	<del></del>
		michelle.dadisman@tavisto		
		E-mail address: (	to be used for future annual report notifi	cation)
For further i	nformation c	oncerning this matter, please ea	ill:	
Michelle Da	ıdisman		407 909-9957 at () Area Code Daytime	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	ne following amount:		
□ \$25.001	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

28H NOV -6 P 2:57

827 Communications, LLC	<u></u>	
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on or uted Liability Company) 175 L.	RELATION OF LONDA
The Articles of Organization for this Limited Liability Comp Florida document number <u>L08000080682</u> .	pany were filed on August 2	2, 2008 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES:	<u>s</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address  Name of New Registered Agent:		records, enter the name of the n
New Registered Office Address:		
	Enter Florida street address	
		, Florida
New Registered Agent's Signature, if changing Registered Ag	•	zip c.aae
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	agree to act in this capac dete performance of my di t as provided for in Chapte	uies, and I am familiar with and er 605, F.S. Or, if this document is
_	Changing Registered Agent, Si	gnature 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

Title	<u>Name</u>	Address	Type of Action
VP. T	Jeffrey S. Smith	6900 Tavistock Lakes Blvd.	
		Suite 200	
		Otlando, FL 32827	
			□ Change
VP, T	Benjamin A. Weaver	6900 Tavistock Lakes Blvd.	■ Add
		Suite 200	□ Remove
		Orlando, FL 32827	
			☐ Change
			□ Add
			O Remove
			☐ Change
		***************************************	□ Add
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Note:	ive date, if other than the date of filing:
the rec ) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	November Le 2019.
	Signature of a member or authorized representative of a member  James L. Zbob President
	Typed or printed name of signee

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Filing Fee: \$25.00