# L08000117537

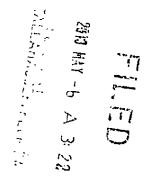
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## **COVER LETTER**

Division of Co		•			
	Holdings & Investments, LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Picase return all correspo	ondence concerning this matter	to the following:			
	Avery L. Anderson				
		Name of Person			
		Firm/Company		منه درخ	
	922 Balmoral Way		31	73.3	<u>ا</u> :
	Melbourne, FL 32940	Address		A A	
	Melbourne, FL 32940	City/State and Zip Code	<del></del>	ري 2:	١
	E-mail address: (	to be used for future annual report notif	ication)	,	
For further information of	concerning this matter, please c	all:			
Avery L. Anderson		904 728-8430 at ( )			
Name o	of Person	Area Code Daytime	: Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate o Certified Co <sub>1</sub> (additional copy	f Status & py	

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

Anderson Holdings & Investments, LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	iny as it now appears on our reco Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company Porida document number $\frac{1.08000117537}{1.08000117537}$ .	were filed on 12/29/2008	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		The second
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		بين ال
		F.3
If amending the registered agent and/or registered of egistered agent and/or the new registered office address her		rds, <u>enter the name of the</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	ress
		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>	<u>Address</u>	Type of Action
MGR	Steven, Metayer	922 Balmorał Way	
		Melbourne, FL 32940	
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Effective date, if other than the factive date is listed, the date is	he date of filing: nust be specific and ca	nnot be prior to do	nte of tiling or more	than 90 days at	tional) ter filing.	) Pursuant	to 605.020
Note: If the date inserted in this document's effective date on the	block does not mee	t the applicable	statutory filing re	equirements, t	his date	will not l	be listed a
ne record specifies a delay The 90th day after the re		e, but not ar	n effective tim	e, at 12:01	ia.m	on the	earlier c
Dated April 29		2019					
		70					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00