## 69000041084

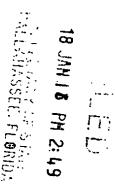
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100307599471

01/18/18--01012--005 \*•25.00



JAN 19 2016 Y SULKER

## **COVER LETTER**

Division of	of Corporations					
SUBJECT:	Bosun	PROPER	enes & S	ales, L	را د	
		Name of Lim	ited Liability Company			
The enclosed Artic	les of Amendment a	nd fee(s) are sub-	mitted for filing			
The enclosed Arrice	nes of Amenament a	na rector are suo.	miles for times.			
Please return all co	rrespondence conce	rning this matter	to the following:			
		7	J Delg	aclo	<u> </u>	
			Name of Person			
		Ba	SUA Pro- Firm/Company	pertie	s, Lic	
			14 MAY F	10WEX	cor	
			AVE LAN ( City/State and Zip Cod	D, PC	33810	
		BMOJ DE	LCAND REA	LTON @	gmail.com	7
		E-mail address: (	to be used for future annu	ai report notifica	imon)	
For further informa	ation concerning this	matter, please ca	all:			
02 D	elgado		at ( <b>%63</b> )_ Area Code	258	8288	
1	Name of Person		Area Code	Daytime T	elephone Number	
Enclosed is a chec	k for the following a	mount:				
\$25.00 Filing	Fee □ \$30.00 Certif	Filing Fee & cate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is c		☐ \$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is en	itus &

MAILING ADDRESS:

TO:

Registration Section

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

Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	1114 may flower Dr LAKELAND, FL 33810
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of	ffice address on our records, enter the name of the new
registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

## New Registered Agent's Signature, if changing Registered Agent:

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 ompany has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
AMBR	Jorge Delgado	5632 Amelle ST	(# :Add
	·	5632 Annelle ST LAKELAND, PC 33810	Remove
			Change
			Add
			🗆 Remove
		<del></del>	Change
			D Add
			Remove
			Change
		ASS	<u></u> □ <u></u> 3dd ;
			Remove
		D <sub>A</sub>	Change
			Add
			Remove
			Change
			🗆 Remove
			Change

		·							_
•	•								
<del></del>					-			<u>_</u>	_
		·			· <u>-</u>		<u> </u>		
									_
							<del></del>		-
	-								
									<del></del>
									-
			-			•			
				-			<del>```</del> ;	<del>- =</del>	_
								ر ا	
								<del>- }</del>	
							\$\$	€9	
								⁄ ₽¥	11
								29	— <del>į</del>
							<b>6</b>		
			-		<u> </u>		<del>Ç</del> .	ص	<del></del>
		<u></u>	<u></u> .		. <u>.                                   </u>				
Effective date, if fan effective date is Note: If the date document's effect	inserted in this bl	lock does not	meet the ap	plicable stat	filing or mon	(0 e than 90 days requirements,	after filing.) Pu	rsuant to 6 not be 1	605.0207 isted as
ne record spec The 90th day				not an ef	fective tin	ne, at 12:0	)1 a.m. on	the ear	rlier of
Dated	JAN		2017	<u>8</u> .					
Jaieu	- Andrews								
Dated	1	$\angle$							

Page 3 of 3

Typed or printed dame of signee

Filing Fee: \$25.00