109000044466

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COVER LETTER

	Registration Sec Division of Cor _l				
our in a		rworks, llc			
SUBJEC	T:	Name of Lim	ited Liability Company		
The enclo	osed Articles of .	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ndence concerning this matter	to the following:		
		NANCY PEMBROKE			
			Name of Person		
	WILLIAM G. PEMBROKE, CPA, P.A.				
	Firm Company				
		8517 S US HWY 1			
			Address		
		PORT ST LUCIE, FL 349			
			City/State and Zip Code		
		BLEWIS@AEGIS-NETWO			
		E-mail address: (to be used for future annual report notific	cation)	
For furth	er information c	oncerning this matter, please c			
NANCY	PEMBROKE		at (772) 336-3331 Area Code Daytime		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed	is a check for th	e following amount:			
\$25.0	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 ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Compan (A Florida Limited Li	v as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number L09000044466	vere filed on 05/07/2009	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "LLC" or the	abbreviation "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)		
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	ice address on our records, <u>ente</u>	er the name of the n
registered agent and/or the new registered wittee address neve	•	
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_	TAMMY L. LEWIS	1431 OAK ST, APT 32	Add
		MELBOURNE, FL 32901	Remove
			Change
			Add
			☐ Remove
			Change
			☐ Remove
			Change
			Remove
		,	☐ Change
			Add
			Remove '
			Change
			□ Add + -
			□ Remove
			Change

Effective date, if other than the date of filing: ((If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The effective date as delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of The 90th day after the record is filed. Dated Dated Date Department of State's records D							
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Signature of a member or authorized representative of a member :							:
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	1710	IAN L. LEWIS, JR.		or printed name of			

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