LOQUID 393

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(Address)
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(City/State/Zip/Phone #)
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(Document Number)
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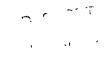
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 7, 2017

RANDI WHITE 1576 STARGAZER TERRACE SANFORD, FL 32771

SUBJECT: CREW LABOR MAINTENANCE MANAGEMENT GROUP, LLC.

Ref. Number: L09000120393

We have received your document for CREW LABOR MAINTENANCE MANAGEMENT GROUP, LLC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FL CORP, but your entity is a FL LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please-call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 917A00024741

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RECEIVED

JAN - 2 2018

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Crew habor (Name of the Limited Liability Cor	Maintenane Management Group npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Comparing Logo 120393	any were filed on $\frac{12/18/2009}{2009}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited b	iability company here:
The new name must be distinguishable and contain the words "Limited Li 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)	5
B. If amending the registered agent and/or registered registered agent and/or the new registered office address l	l office address on our records, enter the name of the new here:
	Chael White Star gazer Terrace Enter Florida street address Florida 32771 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.

f 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

Title	Name	Address	Type of Action
President	Michael White	1576 Stargazer Terrai	e □ Add
		Fanford, F1.32771	□ Remove
		To: President	Change
Vice Pres.	Randi White	1576Stargazer Terrace	
		Sunford, F1.32771	☐ Remove
		To: Vice President	Change
			Add
			🗖 Remove
		 	Change
			□ Add
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ctive date, if other than the date of filing:	(optional) 🕡
1 If the date inserted in this block does not meet the applicable state	
ment's effective date on the Department of State's records.	

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Filing Fee: \$25.00