1100000 23635

| (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: | |
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

| Division of | Corporations | | |
|------------------------|---|--|---|
| SUBJECT: | | SUSTRIES ited Liability Company | LLC |
| | Name of Lim | ited Etability Company | |
| | | | |
| The enclosed Article | s of Amendment and fee(s) are sub- | mitted for filing. | |
| Please return all corr | espondence concerning this matter | to the following: | |
| | <u> </u> | J. PRENDES | > |
| | DEERE | INDUSTRIES L | |
| | 5711 Mi | Chelangelo ? | <u>=</u> |
| | Corxi C | City/State and Zip Code | 33146 |
| | Pyan () (E-mail address: () | leere Shell. Com | cation) |
| For further informati | on concerning this matter, please co | all: | |
| Ryan J | - PRENDES | at (305) 936-8 Area Code Daytime | 36 32 Telephone Number |
| , | or the following amount: | | |
| \$25.00 Filing Fe | e S30.00 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) |
| Re Di | AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 | STREET/COURIE Registration Section Division of Corpora Clifton Building | |

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Company as it now appears on our records.
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on _03 Florida document number 400000 23635 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 Liability Company," the designation "LLC" or the abbreviation "LLC" 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 |
|--------------|-------------------|-----------------------|----------------|
| AMBR | RAYMOND J. JACOUD | 110 Washington Ave Hz | 508 🗆 Add |
| | • | 110 Washington Ave H2 | Remove |
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| fective date, if other than the date of filing: | in 90 days after filing.) Pursuant to 605.02 |
| record specifies a delayed effective date, but not an effective time, | at 12:01 a.m. on the earlier |
| he 90th day after the record is filed. | |
| The 90th day after the record is filed. | |

Page 3 of 3

Filing Fee: \$25.00