L100000 35560

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COVER LETTER

	tion Section of Corporations		
SUBJECT:	TEQUESTA BALLA Name of Lin	way uc	
,	Name of Lin	nited Liability Company	
The enclosed Artic	ties of Amendment and fee(s) are sub	omitted for filing.	
Please return all co	orrespondence concerning this matter	to the following:	
	FRAN	AN PICTULEV E	LH .
		Name of Person	
	TEQUE	Firm/Company	Contany
	<u>267</u> S.	US HIGH WAY	11
	TEQU	ESTM TO 33 Y 69 City/State and Zip Code	
			notification)
_	207 S. US HECHWAY 1 Address TEQUESTM, FC 33 Y 69 City/State and Zip Code E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: PLAN ANDIWIEVELY Name of Person Area Code Daytime Telephone Number		
1	Name of Person		rtime Telephone Number
Enclosed is a chec	k for the following amount:		
92 \$25.00 Filing	Fee S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing A		Street Address	
	ition Section a of Corporations	Registration Division of C	
P.O. Bo	x 6327	The Centre of	of Tallahassee
Tallahas	ssee, FL 32314	2415 N. Moi	rroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TEQUESTA BLU	INY L	LC			
TEQUESTA BLAW (Name of the Limited Liability Compan (A Florida Limited Li	y as it now appea ability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Company v	vere filed on _	4/01/2010	and assigned		
Florida document number <u>L1000035560</u>		•			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil	ity company h	ere:			
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the	designation "LLC" or the abl			
Enter new principal offices address, if applicable:		- <u> </u>	2020		
(Principal office address MUST BE A STREET ADDRESS)		上五	A "		
		7. 3.	<u> </u>		
			P 111		
Enter new mailing address, if applicable:			<u>"</u>		
(Mailing address MAY BE A POST OFFICE BOX)		그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	29		
			-		
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ldress on our	records, <u>enter the nam</u>	e of the new register		
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 agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as policing filed to merely reflect a change in the registered office of	performance of covided for in	f my duties, and I am f Chapter 605, F.S. Or,	amiliar with and if this document is		

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
MGK	MATTHEW WEBSTEL	287 S. US HIZHWAY 1	□Add
•		TEWESTA, FL 33469	& Remove
MGK	FRAN ANDREWLEVERH	287 S. US HIBHWAY 1	DAdd
		TEQUESTA, FL 33469	□Remove
			□Change
			□Add
		SECRZIMA: ALLAHAS	Remove 7020 JAR Change 9 Add 5: 26 Remove
		FO SA	Add Si Remove
			□Change
			□Remove
			Change
			□Add
			□Remove
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an effecti <u>ote:</u>	date, if other that we date is listed, the da the date inserted in the 's effective date on	ite must be spe this block do	eific and can es not meet	not be prior the applica		g or more than		er filing.)		
record sp is filed.	pecifies a delayed e	ffective date.	but not an e	effective ti	ne, at 12:01	a.m. on the	earlier of:	(b) The	90th day	after the
nted	JANUARY	7		20	_ ·					
		//								
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