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D. SCOTT MAR. 2 2017

## **COVER LETTER**

Division of Corporations
SUBJECT: Capstone Planning, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person  Capstone Planning  Firm/Company  31 Lupi Ct Stelao  Address  Palm Coast FL 32137  City/State and Zip Code  Capstone Planning & quail.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tinothy M. Wiltsay at (386) 202-4498 35  Name of Person Area Code Daytime Telephone Number 37
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\text{ \$\sigma\$ \$30.00 Filing Fee & \$\text{ \$\sigma\$ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\sigma\$ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is enclosed)} \$\text{ \$\text{Certified Copy } \\ (additional copy is encl

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

Capstone	Plannin	p, LLC		
(Name of the Limited Liability ( (A Florida Li	Company as it now appea mited Liability Company)	rs) on our records.)		
The Articles of Organization for this Limited Liability Com Florida document number <u>L) 0000039</u>	=	2/10/2011	and assig	ned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	<u>d liability company h</u>	ere:		
The new name must be distinguishable and contain the words "Limited	i Liability Company," the	designation "LLC" or the	abbreviation "L.L.	C."
Enter new principal offices address, if applicable:			<del></del>	
(Principal office address MUST BE A STREET ADDRES	<u>55)</u>			
				<del></del>
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·			
			<u> </u>	
B. If amending the registered agent and/or register registered agent and/or the new registered office addres		our records, enter	r the name of	the new
			TALO SEC	
Name of New Registered Agent:			墨西哥	T
New Registered Office Address:	E-A Flo	rida street address	<u> </u>	<del></del>
	Enter Pio	, Florida		ED_
	City		Zip Code	
New Registered Agent's Signature, if changing Registered A	gent:		37	
I hereby accent the appointment as registered agent and	d agree to act in this	capacity. I further as	ree to comply	with the

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 **Type of Action** <u>Title</u> **Name** <u>Address</u> Conniel. Wiltrag 31 Lupi Ct Steldo Madd Palm Coast FL 32137 DRem \_□ Change □ Add □ Remove \_□ Change □ Add □ Remove ☐ Change \_□ Add е

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	Page 2 of 3		

Effective date, if other than the date of filing:  (In a 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 a document's effective date on the Department of State's records.  The 90th day after the record is filed.  Dated  AUT  Signature of a member of date of a member of						
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.  The record specifies a 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  Signature of a member or authorized representative of a member	, e					
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