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S. WARREN AUG 2 3 2017

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 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:
Romey Padgett
P. D. P. L. C. Firm/Company
4968 Marguerite St.
Middlebuc Fl 32008 City/State and Zip Code Tanera Vay Do Grad. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tame of Person at Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassec, 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**

ROP, LL	C	
(<u>Name of the Limited L</u> (A F	iability Company as it now appears on lorida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabil Florida document number		8 2010 and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the ROP COLINE-S OF The new name must be distinguishable and contain the words	MORTH Floor	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable:		·
(Mailing address MAY BE A POST OFFICE BO.	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	4	
New Registered Office Address:		
	Enter Florida s	street address
<u>-</u>		, Florida
N D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	City	Zip Code
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered approvisions of all statutes relative to the proper accept the obligations of my position as register being filed to merely reflect a change in the regit company has been notified in writing of this change in the sequence.	gent and agree to act in this cape and complete performance of my red agent as provided for in Chap istered office address. I hereby ca ange.	duties, and I am familiar with and oter 605, F.S. Or, if this document is onfirm that the limited liability
	If Changing Registered Agent, Page 1 of 3	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>	Name	<u>Address</u>	Type of Action
			□ Add
			☐ Remove
		·	☐ Change
			Add
			□ Remove
			Change
			D Add
			□ Remove
			☐ Change
			D Add
			□ Change
			Remove
			PRanger 2
		.	Remove
			☐ Change

fective date, if other than the date of filing: (optional) n 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 0207 Reg. (The date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted as cument's effective date on the Department of State's records. Tecord 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. Signature of a member or authorized representative of a member Signature of a member or authorized representative of a member Record P. Paragonal H. Signature of a member or authorized representative of a member					•						_
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Filing Fee: \$25.00