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## **COVER LETTER**

TO:	_	istration Sec ision of Corp					
el:Di	ECT:	WHEN ALI	L SEEMS TO BE GOING WE	ELL. LLC			
SUBJ	EC1:	Name of Limited Liability Company					
The e	nclosed	Articles of z	Amendment and fee(s) are sub-	mitted for filing.			
Please	e return	all correspo	ndence concerning this matter	to the following:			
			Daniel D. Whitehouse, Esc	1.			
				Name of Person			
			Whitehouse & Cooper, PL	LC			
Firm/Company 201 E. Pine Street, Suite 205					<del></del>		
	Address						
			Orlando, FL 32801				
				City/State and Zip Code			
			e.warren@bfsworks.com	to be used for future annual repor	t notification t		
For fu	irther ir	iformation co	oncerning this matter, please of		Charleshory		
dwhii	tehouse	@whitehous	se-cooper.com	321 285-230 at ()	00		
		Name of		Area Code D	aytime Telephone Number		
Enclo	sed is a	check for th	se following amount:				
■ S	25,00 F	iling Fee	☐ \$30.00 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		

MAILING ADDRESS:

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

# DocuSign Envelope ID: 794DFDF0-D9BA-407F-B793-7A56B3555FE3 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WHEN ALL SEEMS TO BE GOING WE	EL, LLC	
( <u>Name of the Limited Liah</u> (A Flor	oility Company as it now appears on our records.) ida Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number	Company were filed on 07/29/2010	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "I.	imited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<b>18</b>
(Principal office address MUST BE A STREET ADI	DRESS)	
		N 45
Enter new mailing address, if applicable:		7 PH 18
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad  Name of New Registered Agent:  New Registered Office Address:		nter the name of the new
	Florid:	
	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.

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID. 794DFDF0-D9BA-407F-B793-7A56B3555FE3
IT 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
MGRM	JONATHON E. WARREN	984 GLENVIEW CIRCLE	
		WINTER GARDEN, FL 34787	Remove
		<del></del>	☐ Change
			□ Remove
		<del>-</del>	Change
			Add
			□ Remove
		<del></del>	☐ Change
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			Change
			Add
			Remove
			□ Change

	. <u>.</u>	
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	-	
	<del></del>	<del></del>
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		79
		2:
		<u> </u>
Note: If the date inserted in this b	st be specific and cannot be prior to date of filing or m lock does not meet the applicable statutory filin	(optional) nore than 90 days after filing.) Pursuant to 605.02 g requirements, this date will not be listed
document's effective date on the I	epartment of State's records.	
ne record specifies a delaye The 90th day after the rec	d effective date, but not an effective toord is filed.	time, at 12:01 a.m. on the earlier
Dated June 18	. 2018	
Ed Warren		
279B89CC717B4DC	Signature of a member or authorized representative	

Page 3 of 3

Filing Fee: \$25.00