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SECRETARY OF STATE OF STATE OF CORPORATIONS

B. KOHR

APR 1 5 2011

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Co	porations		••	
CVID IV. CIT	THE SAFEHA	RBOR GROUP, LLC		
SUBJECT:		ited Liability Company		
			- 200 - 200 - 200 - 200	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	17 APR 14 PH 4: 34	
	ondence concerning this matter	_	F 8	
Trease return an correspo	onderec concerning this nation	to mo tonowing.	Z	
		JACOB ADAMS	Ę.	
Name of Person				
	THE SA	AFEHARBOR GROUP, LLC		
	And the second s			
	400F D			
	1035 PRIMERA BLVD. SUITE 1041 Address			
	<u>L</u>	AKE MARY, FL 32746 City/State and Zip Code		
	ACIAI.	MS@THESAFEHG.COM		
•		to be used for future annual report notific	cation)	
For further information	concerning this matter, please	call:		
.1Δ	COB ADAMS	at (855)	300-4424	
Name of Person		Area Code & Daytime		
: *				
Enclosed is a check for t	he following amount:			
\$25.00 Filing 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/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	n ations ater Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

THE SAFEHARBOR GROUP, LLC

(A Florida Limited I	ny as it now appea Liability Company)	irs on our records.	1 4 .
The Articles of Organization for this Limited Liability Company	were filed on	11/05/2010	دن and assigned
Florida document number L10000119671			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Comp	any," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:	1035 PRIMERA BLVD. # 1041		
(Principal office address MUST BE A STREET ADDRESS)	LAKE MARY	, FL 32746	
			·····
Enter new mailing address, if applicable:	1035 PRIME	RA BLVD. # 1041	
(Mailing address MAY BE A POST OFFICE BOX)	LAKE MARY	′, FL 32746	- Re-urea
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		our records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:	Er	nter Florida street addre	ss
	City	, Florida	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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action **Title** <u>Name</u> <u>Address</u> **GINA ODAY** MGRM ☐ Add 222 RUSKIN STREET Remove LAKE MARY, FLORIDA 32746 ∏ Add Remove ☐ Add Remove ∏Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Jacob Adams Address is Now 2150 1035 Primera Blus # 1041 LAKE MARRY, FI 32746. 2011 Signature of a member or authorized representative of a member **JACOB ADAMS** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00