L100001219542

(Re	equestor's Name)	
(Ad	idress)	
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SECRETARY OF STATE

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COVER LETTER

FO: Registration Secti Division of Corpo	on s		4
SUBJECT: Buc	Kley Investme	ents, LLC ited Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	Steve So	amaha Name of Person	
		Firm/Company	
	3200 Law	n Ave Address	
		City/State and Zip Code	
	Stevesan E-mail address: (1	naha 1169 mail. o be used for future annual report noti	COM fication)
For further information con	cerning this matter, please ca	all:	
Steve S Name of P	amaka erson	at (<u>813</u>) <u>205</u> Area Code Daytim	- 4090 ne Telephone Number
Enclosed is a check for the	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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION **OF**

Buckley Investment (Name of the Limited Liability Compa (A Florida Limited	Any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 10000129542</u> .	_
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	bility company here:
The new name must be distinguishable and end with the words "Limited Lia	bility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3200 Lawn Ave
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FL 33611
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3200 Lawn Ave Tampa, FL 33611
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	office address on our records, <u>enter the name of the new</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
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

Authorized	Member	heina	odded	or remov	ed from	AUF P	ecords.
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MGR = MS $AMBR = AS$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	WF Management, W	C P.D. Box 1102 Tampa, FL 33601	🗆 Add
	,		▲ Remove
MGR	Peter D. Pierce	P.D. Box 22919	/X (Add
		P.D. Box 22919 St. Peters burg, FL 33742	Remove
			🗆 Add
			□ Remove
-			Add
			Remove
			Remove
			□ Add
			Remove

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	FILED SECRETARY OF SHALL DIVISION OF COROCORACIONS
	15 MAR 10 PH 12: 59
Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of the date this document is filed by the Florida Department of	
The effective date must be specific, cannot be prior to date of	f receipt or filed date and cannot be more than 90 days after State)
The effective date must be specific, cannot be prior to date of the date this document is filed by the Florida Department of Dated 3-6-8 March 6,	freceipt or filed date and cannot be more than 90 days after State) 2015 .
The effective date must be specific, cannot be prior to date of the date this document is filed by the Florida Department of Dated 3-6-8 March 6,	f receipt or filed date and cannot be more than 90 days after State)

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Filing Fee: \$25.00