## L110000 11402

(Requestor's	Name)
(Address)	
(Address)	
(2) (2)	101
(City/State/Zij	o/Phone #)
PICK-UP W	AIT MAIL
(Business En	tity Name)
(Document N	umber)
Certified Copies Cer	tificates of Status
Special Instructions to Filing Office	per:
	ļ





700276489907

700276489907 09/04/15--01028--016 \*\*30.00

2015 SEP -4 PH 3: 56
SECRETARY OF STATE
SECRETARY OF STATE

SEP OF 2015 J. HARRIS

## **COVER LETTER**

TO: Registration Section Division of Corporation Corporation of Corporation Corporation (Corporation Corporation)			
SUBJECT:	APE. (	com LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	Casey	Scheu Name of Person	
	0.00	Name of Person	
	Sillia	Federal Service	CES
	104 14	- Pleasant Di	<u>^.                                    </u>
		Address	
	Key La	Gry/State and Zip Code  Simia no obe used for future annual report not	7
	Accent	Gity/State and Zip Code	·
	E-mail address (1	to be used for future annual report not	(V)
For further information con-	cerning this matter, please ca		J
Casey Sc	heu	at ( <u>305</u> ) 300 Area Code Daytin	-3054
Name of Po	erson	Area Code Daytin	ne Telephone Number
Parking to the design	C. II		
Enclosed is a check for the	<b>.</b>		
□ \$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

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

(Name of the Limited Liability Compa (A Florida Limited L	, ,	)
The Articles of Organization for this Limited Liability Company Florida document numberL11000011402	were filed on Jan.27, 2	2011 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil  SMT. Repair  The new name must be distinguishable and contain the words "Limited Liabil	110	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<del></del>
(Principal office address MUST BE A STREET ADDRESS)	- NO	AF SE
Enter new mailing address, if applicable:		SECTION PROPERTY.
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		enter the name of the new
Name of New Registered Agent:	1/0	
New Registered Office Address:	Enter Florida street address	
	, Flor	ida
	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

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 **Title** <u>Name</u> <u>Address</u> **Type of Action** □ Add □ Remove □ Add □ Remove ☐ Change □ Add □ Remove \_□ Change □ Add □ Remove -\_□ Change □ Add □ Remove □ Change

		ı								
									<del> </del>	
	<u>.                                    </u>									
				·····						:
	<del></del>									
		_					· · · · · ·			
	<del></del>									
<del></del>		·			· •·					
								**		
te: If the o	te, if other the late is listed, the d date inserted in ffective date or	this block	does not n	neet the app	licable stati	ming or more	than 90 days	optional) after filing.) , this date w	Pursuant to 605 vill not be liste	.0207 ed as
record s he 90th	pecifies a de day after th	elayed ef ne record	fective d	ate, but r	not an eff	ective tim	e, at 12:0	)1 <b>a.m</b> . o	on the earlie	
ed	Septem!	$\propto$ (	}	2019	5//				SEP -4	) ! !
					/	<b>/</b> \				,

Page 3 of 3

Filing Fee: \$25.00