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(Re	questor's Name)	<u> </u>
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
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TALLAHASSEE, FLOUDS

MAY 11 2016 S. YOUP&G

COVER LETTER

TO: Registration Se Division of Con			
Foxgrove I SUBJECT:	Holdings, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The male 1 A d 1 - A		to an oraș	
	Amendment and fee(s) are sub	- -	
Please return all correspo	ondence concerning this matter	to the following:	
	Allen Knoll		
		Name of Person	
	_		
•		Firm/Company	
	40 SW 13th Street Unit 10	002	7 7 7 7 7 7 7 7 7 7
		Address	
	Miami, FL 33130		fication)
		City/State and Zip Code	P
	allenknoll@gmail.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Allen Knoll		305 498-0617 at ()	
Name o	of Person		e Telephone Number
Enclosed is a check for t	he following amount:		
	_	E ASSOCIATION DE LA	FI 0.00 00 WW
\$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)
	ING ADDRESS:	STREET/COURI	
	ration Section on of Corporations	Registration Section Division of Corporation	
	ox 6327	Clifton Building	ations
Tallah	assee, FL 32314	2661 Executive Ce Tallahassee, FL 32	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

roxgrove Holdings, LLC		
(Name of the Limited Liability Companies (A Florida Limited L	ny as it now appears on our records.)	•
. (************************************	and the second s	
The Articles of Organization for this Limited Liability Company	were filed on $\frac{2/11/2011}{2}$ and a	assigned
Florida document number L11000018915		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		750
	***	5 FC
		HAY 10
		HASSIE TLOWN
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		2 5
		F 9
		9
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		e of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City Zip Coo	de

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

<u>Title</u>	Name	Address	Type of Action
MGR	Allen Knoll	40 SW 13th Street Unit 1002	Add
	Miami, FL 33130	□ Remove	
		·	□ Change
			□ Add
		<u> </u>	□ Remove
			Chânge LAHASS
		□ Remove.	
		□ Add	
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. Effec	tive date, if other than the date of filing: (optional) ffective 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 60) F 0208 (2	13/4-3
Note	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list nent's effective date on the Department of State's records.	sted as th	(D)
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.	lier of:	
	April 25 , 2016 , 2016		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00