L11000034181

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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 16, 2017

ANTHONY & SABRINA SODANO 15347 NAVION DR PORT ST LUCIE, FL 34987

SUBJECT: CRESENCE, LLC Ref. Number: L11000034181

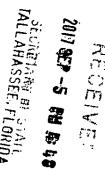
We have received your document for CRESENCE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Ther are two separate documents attached, however than can only be one Registered Agent listed for the company. If you are trying to add a memberand change register agent, then you just need to file amendment form only

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 217A00016822



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CRESENCE	LLC
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number 11100034181	Company were filed on $\frac{3}{2111}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lip $\bigcap A$	nited liability company here:
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	NA E
(Principal office address MUST BE A STREET ADD	ORESS)
Enter new mailing address, if applicable:	NA
(Mailing address MAY BE A POST OFFICE BOX)	
registered agent and/or the new registered office ad	istered office address on our records, enter the name of the new dress here:
Name of New Registered Agent:	MITHORY & CERTIFICATION OF THE PROPERTY OF THE
New Registered Office Address:	Enter Florida street address
	, Florida
	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** Name **Address Type of Action** MGR odano 15347 Navion DR. DAGO PORT ST. LUCIE, F Change Sabrina Sodano Navion DR. ☐ Change 🗖 Add ☐ Remove ☐ Change □ Remove ☐ Change □ Add

□ Remove

☐ Change

	We need to add Sabrina Sodano
****	to the Musiness CRESENCE LLC
-	· American
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	1)
(If an effe	ve date, if other than the date of filing: (optional) cetive 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 605.0207 (3)(b
Note: docume	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated_	august Th. 2017.
	D.R.S. hu
	Signature of a member or authorized representative of a member
	Typed or printed name of signice

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Filing Fee: \$25.00