

. (Re	equestor's Name)	
(Ac	ldress)	
(Ac	tdress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	-
	Office Use Only	/
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COVER LETTER

Div	ision of Corpo	rations			
SUBJECT:	STEPHO, LL				
Name of Limited Liability Company					•
The enclose	d Articles of Ar	mendment and fee(s) are subm	itted for filing.		
Please return	n all correspond	lence concerning this matter to	the following:		
		DANIEL E. FERNANDEZ			
			Name of Person		_
		DANIEL E. FERNANDEZ,	P.A.		
			Firm/Company		
		7480 SW 40TH STREET, S	UITE 760		
			Address	··· <u>·</u> ·····	
	,	MIAMI, FL 33155			
			City/State and Zip Code		
		SSHEPHERD@CRAFTMAI	RKBAKERY.COM		
		E-mail address: (to	be used for future annual rep	ort notification)	-
For further	information cor	ncerning this matter, please cal	1:		
DANIEL E	. FERNANDEZ	Z	305 264-0	0881	
	Name of I	Person		Daytime Telephone Num	per
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 enclose	Certifi (ed) Certifi	Filing Fee, cate of Status & ed Copy nal copy is enclosed)

MAILING ADDRESS:

Registration Section

TO:

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

STEPHO, LLC				
(Name of the Limi	ted Liability Company (A Florida Limited Liab	as it now appears on our records.) ility Company)		
The Articles of Organization for this Limited L. Florida document number L11000043752	iability Company we	ere filed on APRIL 12, 2011	and as	ssigned
This amendment is submitted to amend the following	lowing:			
Florida document number L11000043752 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability 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)				
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designation "LLC" of	or the abbreviation "!	L.L.C."
Enter new principal offices address, if appli	cable:		·	·
(Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:	-			
(Mailing address MAY BE A POST OFFICE	E BOX)			
B. If amending the registered agent and registered agent and/or the new registered of		ce address on our records,	enter The name NOV	e of the nev
Name of New Registered Agent:	DANIEL E. FERT	NANDEZ P.A.	ARY SSEE	Elizabeth Elizabeth
New Registered Office Address:	7480 SW 40TH S	TREET, SUITE 760	- F - S	
		Enter Florida street address	7: 1 TAI ORII	garden, Juneari
	MIAMI		rida 71155 F	
		City	zm Cod	o

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

Page 1 of 3

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
MGRM	BRAY FAMILY TRUST	3899 MAPLE AVE., SUITE 300	
		DALLAS, TX 75219	■ Remove
			Change
MGR	BENNIE M. BRAY	3899 MAPLE AVE., SUITE 300	= Add
		DALLAS, TX 75219	□ Remove
		·	Change

			☐ Remove
			Change
			□ Remove
			Change
			Add
			Remove
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	**************************************		□ Abb
			☐ Remove
			☐ Change

				
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date	(option	nal)	wenant i	_ሳ ፋበና በና
lote: If the date inserted in this block does not meet the applicable s	tatutory filing requirements, this	late wil	l not b	e listed
ocument's effective date on the Department of State's records.				
e record specifies a delayed effective date, but not an	effective time at 12:01 a	m on	the e	adier
The 90th day after the record is filed.	circulation of all to a di			
NOTES OF P				
Pated NOVEMBER 8 , 2017				
NOVEMBER 8 , 2017 .				

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Filing Fee: \$25.00