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(Re	questor's Name)	
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06/04/18--01021--025 **25.00



COVER LETTER

SUBJECT:	AANIS O'SHECC Name of Limit	td Liability Company	
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
	Rose	LT MANIS	
	470 Ca	Address	B-101
	West Palm C	City/State and Zip Code	3409
Division of Corporations SUBJECT: MANIS O'S IRCL LCC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: MANIS & LONDAY C. P.A.'S P.A. Final Company 470 Columbia Dr. B. 101 Address WHIT Plan Beach Pr. 370 9 City/State and Zip Code Beach Manis C. Manis C. P.A. C. A.A. E-mail address: to be used for future annual report notification) For further information concerning this matter, please call: Research Manis at (SL) Distribution Number Enclosed is a check for the following amount: Cartificate of Status Certificate of Status Certified Copy (additional copy is enclosed)	ation)		
For further information co	ncerning this matter, please ca	II:	
Ros Eug Name of	MANIS Person	at (<u>JL)</u> <u>LJL</u> Area Code Daytime T	elephone Number
Enclosed is a check for the	e following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status &

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

MANIS O'SHE	c, uc
(Name of the Limited Liability Company (A Florida Limited Liability Company)	as it now appears on our records.) oility Company)
	,
The Articles of Organization for this Limited Liability Company w	ere filed on 6 (7 [201] and assigned
Florida document number <u>L 11000662</u> 47	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	y company here:
MANIS & Company CL The new name must be distinguishable and contain the words dimited Liability	_C
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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	
	-
Name of New Registered Agent: Roser	TMANIS PE
New Registered Office Address: 470	Colum Bia De B-18 & T Enter Florida street address M BEACIA Florida 33469 City Florida 33969
1. Jac P 27	Read States A
<u> </u>	City: Ap Code:
New Registered Agent's Signature, if changing Registered Agent:	器を
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>	<u>Name</u>	<u>Address</u>	Type of Action
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		West Parin BEACH, F	233409 De Remove
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If amending any other information, enter change(s) here: (Attack			
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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	filing or more than 90 days after mory filing requirements, this	filing.) Pursuant to 60:	5.0207 ted as
document's effective date on the Department of State 3 records.			
the record specifies a delayed effective date, but not an eff.) The 90th day after the record is filed.	fective time, at 12:01 a	a.m. on the earli	ier of
Dated Mog 3 . Zol8 . Signature of a member or authorized rep	resentative of a member		
Rosser Manis Typed or printed name of			

Page 3 of 3

Filing Fee: \$25.00