111000067608

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	÷#)
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M. William 177292000

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2014 JAN 21 PM 3: 01 SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Name of the Limited (A	Liability Company as it no Florida Limited Liability Co	w appears on our records.) impany)	
The Articles of Organization for this Limited Liz Florida document number <u>L11000067608</u>	ability Company were filed	on 06/09/2011	_ and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability comp	any here:	
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liabili	ty Company," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	(ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered off		ess on our records, <u>enter t</u>	ne name of the new
Name of New Registered Agent:	Kristin Spivey		<u>.</u>
New Registered Office Address:	117-B Broadway		
		Enter Florida street addre	ess
	Kissimmee	, Florida <u>347</u>	
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

127 Broadway LLC

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.

Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = 'Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Timothy Majors	117-B Broadway	Add
		Kissimmee FL 34741	Remove
MGR	Ryan Parsons	117-B Broadway	Add
		Kissimmee FL 34741	Remove
MGRM	Kristin Spivey	117-B Broadway	Add
		Kissimmee FL 34741	Remove
MGRM	Russell Spivey	117-B Broadway	Add
		Kissimmee FL 34741	Remove
			——
			Remove
			Add
_			Remove

it amending any other information	n, enter change(s) here: (Attach additional sheets, if necessary.)	
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	_	-
		-
		_
	December 31, 2013	
Effective date, if other than the date	nte of filing: December 31, 2013 (optional)	Λ 7 ('
	ust be specific and cannot be more than 90 days after filing.) (605.02	07 (3
December 30		
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	h Lyn Jan	
Signat	iture of a member or authorized representative of a member	
	ture of a member or authorized representative of a member Word ZACHARY PARSONS Ryan Parsons Typed or printed name of signee	_ _

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