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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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SECRETARY OF STATE

D. BRUCE OCT 25 2016

COVER LETTER

TO:	Registration Se Division of Cor		• • •		
SUBJI	ест: <u></u>	Andora Professional Name of Lim	Services LLC nited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	emitted for filing.		
Please	return all correspon	ndence concerning this matter	to the following:	•	
		Mirian	A (OS) à Name of Person		
		L1100	0007543 9 Firm/Company		
		9981	SW 40 Street		
		Miani	FL 3'31 65 City/State and Zip Code	··.	
		MFundora di E-mail address: (og & bell south - ne to be used for future annual report notifi	cation)	
For fur	ther information co	oncerning this matter, please ca	all:		
	Dennis For	Person	at (<u>305</u>) <u>970</u> Area Code Daytime	S> SX En≺	FILED
Enclos	ed is a check for th	e following amount:		E, 71.	≥ m
ॼ \$2:	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60. SElling Centificate (Centified Co (additional cop	£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

<u>Fundora Professional</u> S	ervices LLC as it now appears on our records.) bility Company)
(Name of the Limited Liability Company (A Florida Limited Lia	bility Company)
The Articles of Organization for this Limited Liability Company w	ere filed on 6 29 7011 and assigned
Florida document number	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	ty 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:	9981 SW 40 street
(Principal office address MUST BE A STREET ADDRESS)	Miani, FL 33165
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	998) SW 40 Street Migni, FL 33165
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	ce address on our records, enter the name of the ne
Name of New Registered Agent:	SE TALL
New Registered Office Address:	9481 SW 40 Street T
Μ.	Enter Florida street address
New Registered Agent's Signature, if changing Registered Agent:	City Cod
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete pe	to act in this capacity. I further agree to comply with th

If Changing Registered Agent, Signature of New Registered Agent

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 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> **Address** Name 1 **Type of Action** □ Add □ Remove ☐ Change _□ Add _□ Remove ☐ Change □ Add ☐ Remove ☐ Change Add Chings **E**□ Add _□ Remove _□ Change □ Add _□ Remove

_ Change

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n effe te:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than If the date inserted in this block does not meet the applicable statutory filing requirent's effective date on the Department of State's records.	90 days after fili	ng.) Purs	uant to 605. not be liste	.0207 (3 ed as th
rec he	cord specifies a delayed effective date, but not an effective time, a 90th day after the record is filed.	at 12:01 a.m	n. on ti	he earlie	er of:
ted_	10/18/2016				
	Signature of a member or authorized representative of a me				
	Signature of a member or authorized representative of a me	ember			
	/				

Page 3 of 3

Filing Fee: \$25.00