LIADAC	80073

	(Requestor's Name)	
<u> </u>	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
		MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instruction	s to Filing Officer:	
	-	
	Office Use Only	



09/15/17--01012--011 **25.00

2011 SEP 15 AMIL: 53

K. SALY SEP 1 8 2017

. y		COVER LETTER
TO: Registration Secti Division of Corpo		
Bettja JeBaile SUBJECT:	y, LLC	
	Nan	ne of Limited Liability Company
The enclosed Articles of Ar	nendment and fee(s) are submitted for filing.
Please return all correspond	ence concerning the	s matter to the following:
	John T. Ankner, E	sq.
		Name of Person
	Law Office of Sau	nders & Saunders, P.A.
	7232 W. Sand Lak	
		Address
	Orlando, Florida 3	 2819
	john@lawsaunders.	City/State and Zip Code
		address: (to be used for future annual report notification)
For further information con-	cerning this matter.	 please call:
John T. Ankner, Esq.		321 319-0459 at ()
Name of Po	erson	Area Code Daytime Telephone Number
Enclosed is a check for the f	following amount:	
\$25.00 Filing Fee	\$30.00 Filing Fee Certificate of S	
Registratio Division c P.O. Box (G ADDRESS: on Section of Corporations 6327 re, FL 32314	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

	RTICLES OF AMENDMENT TO RTICLES OF ORGANIZATION OF	2017 SEP 15 AM 11: 53
Benja JeBaiłev, LLC		TALLANASSILL FLORID
	imited Liability Company as it now appears on our reco	rds.)
· · · · · · · · · · · · · · · · · · ·	imited Liability Company as it now appears on our reco (A Florida Limited Liability Company)	
The Articles of Organization for this Limite	d Liability Company were filed on 07/12/2011	and assigned
		and assigned
Florida document number L11000080073	<u> </u>	
This amendment is submitted to amend the	u following:	
A. If amending name, <u>enter the new nam</u>	<u>e of the limited liability company here</u> :	
The new name must be distinguishable and contain the	be words "Limited Liability Company," the designation "Ll	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if app	licable:	
(Principal office address MUST BE A STR	EET ADDRESS)	
Enternance and the second design of the second		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFIC	<u>5E BOX)</u>	
B. If amending the registered agent a registered agent and/or the new registered	nd/or registered office address on our recor	ds, <u>enter the name of the new</u>
registered agent and/or the new registered	i office address here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
		71t.d.s
	, P	Florida 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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
AMBR	Paul JeBailey		7932 W Sand Lake Road, Suite 102	🛛 Add
			Orlando, Florida 32819	Remove
			- <u></u>	Change
				Add
				Change
				ATU A
				Themove M
			Change	
				D Add 5-
				Remove
				Change
				Add
				Remove
			Change	
<u> </u>				🗆 Add
				O Remove
				Change
		Page 2	of 3	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) .

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	2017 SEP 15 AM 11: 54
	SEP 15 EN
	ALLANASSEE FLORIDA
- <u></u>	Allasser Sint.
	Orina
E. Effective date, if other than the date o (If an effective date is listed, the date must be speed)	f filing: (optional) iffic and cannot be prior to date of tiling or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
<u>Note:</u> If the date inserted in this block doe	spot meet the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Departme	lior State's records.
If the record specifies a delayed effec	tive date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated September 13, 2017	
- AHA	
Signature of	f a member or authorized representative of a member
A. Tom Harb - Manager	
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00