L11000085018

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Becament Hamber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000253853520

11/18/13--01015--017 **25.00

2013 NOV 18 PM 3: 18

NOV 1 9 2013 D. BRUCE

COVER LETTER

	•	•	
TO: Registration Se Division of Cor		· · · · · · · · · · · · · · · · · · ·	
SUBJECT: The	Space Crast- Name of Limit	Provet Tryou ed Liability Company	SUC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	Samant	Name of Person	
	Space Coas	+ Procket Jocke Firm/Company	ys UC
	2745 Patt) Address	
		City/State and Zip Code	Hall to the state of the state
	Space coast	ON CONTRACTOR OF THE CONTRACTO	amail.com
For further information c	oncerning this matter, please ca	all:	amoul configuration
Samuritha Name o	Poole r f Person	at (Area Code & Daytim	7-3589 TS 7 M
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>LHD00850</u> .	nny were filed on <u>07/25/</u> //	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and end with the words "Li".L.C."	imited Liability Company," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:	2745 Pattu Lr) ~
(Principal office address MUST BE A STREET ADDRESS)	melbourne FL 32935	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2745 Potty In Melborne Fi 32985	18 PM 3: 18 SSEE FLORIDA
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		er the name of the new
Name of New Registered Agent: Some New Registered Office Address: 2745	Patty In Enter Florida street of	address
melbou	City, Florida	32935 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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
mGR	SomanthaBobier	2745 Patty In	Add
		melbourne FL	Remove
		32935	
MGRM	nyhal Hammond	2526 2nd Ave	Add
		Palm Bay	Remove
		39905	_
MGR	Bichina Grau	827 Crawford Ave SE	Add
		Palm Bay FL 32909	Remove
mgry:	Michelle heating	898 AACjem Ave	Add
		Palmir Bay FL 32907	Remove
			_₹ <u>U</u>
MGLW	Chelsey Austin	1771 Parisborrow Nus	Add
	J	Palm Bay FL 32907	
		·····	Add
			Remove

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated <u>November 13</u> , 2013.
Pichina Sleans
Signature of a member or authorized representative of a member
Kichina Grau
Typed or printed name of signee
Page 3 of 3

- --

Filing Fee: \$25.00

2013 NOV 18 PH 3: 18