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COTENDETER

TO: Registration Section Division of Corporations
SUBJECT: 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:
Michael B bulholmer
BUS (apila) LLC
1341 Monterey BIUD NE
Saint Petersburg FL 33704
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Bolhi Mey at (\$13) 316-877 Name of Person at (\$13) Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$\$30.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\Bigcup \text{\$\$\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$\$ Certified Copy (additional copy is enclosed)

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

Mame of the Limited Liability Com	ORGANIZATION SECRETARY OF SIDE OF CORPORA Dany as it now appears on our records.) PM 2 PM 2 2 2 3 4 7 7 7 7 7 7 7 7 7 7 7 7
The Articles of Organization for this Limited Liability Compan	y were filed on and signed and
Florida document number (CD) (100008763).	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1341 Monterey BIVD NE
(Principal office address MUST BE A STREET ADDRESS)	Suint Petersburg, F7 33704
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1341 Monterey HUD NE Saint Peterburg, FL 33709
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, <u>enter the name of the new</u> ere:
None of Nov. Davistand Avent	
Name of New Registered Agent:	Malaca Rillo MF
New Registered Office Address: 1341	Enter Florida street address
Saint	Petersburg Florida 33704
	City Zip Code
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	s provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	Brett R. Bollwher	7445 18th Street NE St. Selenburg, FL 33702	Add
		St. Selesburg, FL 33702	🗹 Remove
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Effec	tive date, if other than the date of filing: (optional)		
(If an e	Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purs		
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will innert's effective date on the Department of State's records.	iot be li	sted as the
	·		
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t	he ear	lier of:
) The	e 90th day after the record is filed.		
Dated	8/27/2012		
2			
	Signature of a member of authorized representative of a member		
	Michael Brett Bolhomer		
	Typed or printed name of signee		

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Filing Fee: \$25.00