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K.SALY EXAMINER NIG 30

COVER LETTER

то:	Registration Sec Division of Corp					
SUBJE		APPLE HOLDINGS, LLC				
SUBJE	.c.:	Name of Lim	ited Liability Company			
The enc	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please r	return all correspor	ndence concerning this matter	to the following:			
		SCOTT R. JABLONSKI, I	ESQ.			
			Name of Person			
		CORRIDOR LEGAL LAV	VYER, PLLC			
Firm/Company						
	2903 W. NEW HAVEN AVE. #462					
			Address			
		MELBOURNE, FL 32904				
			City/State and Zip Code			
		E-mail address: (to be used for future annual report notific	cation)		
For furt	her information co	ncerning this matter, please ca	all:			
SCOT	R.JABLONSKI		321 222-0930 at (
	Name of	Person	Area Code Daytime	Telephone Number		
Enclose	ed is a check for the	e following amount:				
\$25	5.00 Filing Fec	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

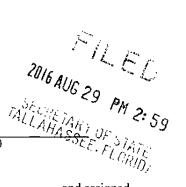
MAILING ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ORCHARD APPLE HOLDINGS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited	Liability Company	were filed on $\frac{11/01/20}{}$	and assigned		
Florida document number L11000124117	 ·				
This amendment is submitted to amend the fo	llowing:				
A. If amending name, enter the new name	of the limited liab	oility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designa	tion "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if appl	icable:	2903 W. New Haven Ave.			
(Principal office address MUST BE A STRE		#462			
		Melbourne, FL 32904			
Enter new mailing address, if applicable:		2903 W. New Haven Ave.			
(Mailing address MAY BE A POST OFFICI	E BOX)	#462			
		Melbourne, FL 32904			
B. If amending the registered agent and registered agent and/or the new registered. Name of New Registered Agent:		<u>.e</u> :	records, enter the name of the ne		
Nov. Powietand Office Address	2903 W. New I	Haven Ave. #462			
New Registered Office Address:		Enter Florida str	reet address		
	Melbourne		, Florida <u>32904</u>		

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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Scott R. Jablonski	2903 W. New Haven Ave.	□ Add
		#462	ПРашана
		Melbourne, FL 32904	Change
			□ Add
			□ Remove
			2016 AND AND T
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Note: If the	date, if other that we date is listed, the date inserted in s effective date or	this block doe	s not meet	the applica	o date of filin ble statutory	g or more than filing requi	(opti 190 days after rements, thi	onal) filing.) Pursus s date will no	ant to 605.0207 (ot be listed as t
	d specifies a de th day after th			e, but not	an effect	ive time,	at 12:01 a	a.m. on th	e earlier of:
Dated Aug	gust 23		20	016					
					_•				
		Signatur	e of a mem	her or autho	rized rangees	ntative of a me	ımbar		

Page 3 of 3

Filing Fee: \$25.00