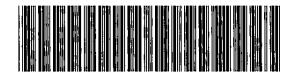
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OCT 2 2 2014 S. YOUNG

COVER LETTER

TO: Registration Sec Division of Corp		* ·	. •
Lochte 18	0, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Shawn M. Zenga		
		Name of Person	
	Lochte Enterprises,	LLC	
		Firm/Company	
	2805 E. Oakland Pa	rk Boulevard #270	
		Address	T 20
	Fort Lauderdale, Flo	orida 33306	
		City/State and Zip Code	235. 29
	shawnzenga@gmail.		河 😟
		to be used for future annual report notific	ation)
For further information co	ncerning this matter, please co	all:	
Shawn M Zenga		954 818-3796	
Name of	Person		Felephone Number
Enclosed is a check for the	e following amount:		
■ \$25.00 Filing Fee	□ \$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)
Registra Division P.O. Bo	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent	tions

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lochte 180 LLC		
(Name of the Limi	ted Liability Company as it now appear (A Florida Limited Liability Company)	<u>'s on our records.</u>)
The Articles of Organization for this Limited L. Florida document number L12000050928	iability Company were filed on 04	4/13/2012 and assigned
This amendment is submitted to amend the following	lowing:	
A. If amending name, enter the new name o	of the limited liability company he	ere:
The new name must be distinguishable and end with the	words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STREE	ET ADDRESS)	<u> </u>
		2 =
Enter new mailing address, if applicable:	···	
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	<u> </u>
		· · · · · · · · · · · · · · · · · · ·
3. If amending the registered agent and registered agent and/or the new registered of		our records, enter the name of the
Name of New Registered Agent:	Shawn M Zenga	
New Registered Office Address:	2805 E. Oakland Park Blv	/d #270
	Enter Flor	rida street address
	Fort Lauderdale	, Florida 33306
	City	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.

Il Changing Registered Agent Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Shawn M Zenga	2805 E. Oakland Park Blvd #270	= Add
		Fort Lauderdale, FL 33306	□ Remove
			Add
			Remove
			Remove
			8 =
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ne effective date must be specific, cannot be the date this document is filed by the Floric mated October 6	pe prior to date of receipt or filed date and cannot be more than 90 d la Department of State)	

Page 3 of 3

Filing Fee: \$25.00