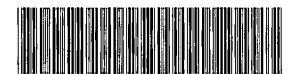


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SECRETARY OF STATE
TALL ATTASCES, FLORIDA

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COVER LETTER

TO:	Registration Sec Division of Corp			
CHBH	Steinie LLC			
SUBJI	.cr:	Name of Limi	ited Liability Company	
		Name of Limited Liability Company d Articles of Amendment and fee(s) are submitted for filing. n all correspondence concerning this matter to the following: Reid McCullough Name of Person McCullough Legal Services Firm/Company 1630 Morrill Street Address Sarasota FL 34236 City/State and Zip Code Reid@MLS941.com		
The en	closed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	ndence concerning this matter t	to the following:	
		Reid McCullough		
			Name of Person	
		McCullough Legal Services	s	
			Firm/Company	
		1630 Morrill Street		
			Address	
		Sarasota FL 34236		
			City/State and Zip Code	
		-		
		E-mail address: (t	to be used for future annual report notif	ication)
For fu	rther information co	oncerning this matter, please co	all:	
Reid N	McCullough		941 525-6385	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclos	sed is a check for th	ne following amount:		
■ \$2	5.00 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)

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

Steinie LLC	
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
	ility Company were filed on 04/26/2012 and assigned
Florida document number L12000056802	nization for this Limited Liability Company were filed on 112000056802 and assigned where L12000056802 ubmitted to amend the following: ne. enter the new name of the limited liability company here: istinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." I offices address, if applicable: ### Interest MUST BE A STREET ADDRESS address, if applicable:
This amendment is submitted to amend the follow	ing:
A. If amending name, enter the new name of the	es of Organization for this Limited Liability Company were filed on 04/26/2012
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:
(Principal office address MUST BE A STREET)	4DDRESS)
•	
<u>(Mailing address MAY BE A POST OFFICE BO</u>	<u></u>
	-
B. If amending the registered agent and/or	registered office address on our records, enter the name of the ne
registered agent and/or the new registered offic	e address here:
Name of New Registered Agent:	To a second seco
New Registered Office Address:	
	Emer Florida street address
	Florida F
	City Zin 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

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Iolanda Steinbrecher	917 BAYSHORE DRIVE ENGELWOOD, FL 34223	≅ Add
			☐ Remove
			☐ Change
		<u></u>	Add
		· 	Remove
			☐ Change
			□ Remove
			Change
	- 7 		
			Remove
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Effective date, if	other than the date (of filing:		(ортіог	al)
Note: If the date i	listed, the date must be spoinserted in this block do ive date on the Departm	es not meet the appl	icable statutory fili	nore than 90 days after fi ng requirements, this c	ling.) Pursuant to 605.0207 late will not be listed as
	ifies a delayed effer after the record is		not an effective	time, at 12:01 a.	m. on the earlier of
November	4	2019			
Dateu	<u> </u>	<u> </u>	·		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00