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M. MILLIGAN DEC 0 7 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Impressioner Dennis Book 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: Angle A
For further information concerning this matter, please call: Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$Certificate of Status & \$\Bigcup \$(additional copy is enclosed)\$\$ 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

(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 120 2 and assigned. Florida document number 12000 2 6
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Clability Company," the designation "LLC" or the abbreviation "LEC."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) JENSEN JENSEN
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent: Name of New Registered Agent: Name of New Registered Agent:
New Registered Office Address: 252 W. Elger Florida street address
City Florida Step Sip 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 = AMBR =	Manager Authorized Member		
Title	Name	Address	Type of Action
NGR	Mirina Dear Stide	JENSEN BACKJE 3495	Add Add
	<u>-</u>	Jensey Brandt 3495]Remove
			Change
1 <u>617</u>	Mountationali Ben	Jensen Benn, Ft 3195	Add
		JENSEN BEARN, Pt 3/95	<u> </u>
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. If amendir	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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E. Effective (If an effective Note: 15 documen	e date, if other than the date of filing: if (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 files the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list the date on the Department of State's records.	05.0207 (3)(sted as the
If the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear 90th day after the record is filed.	lier of:
Dated_	11/26/18 Manula Piarle Dente	Y
	Signature of a member or authorized representative of a member	
	Manuala Piccol, Bentley Typed or printed name of signce	-

Page 3 of 3

Filing Fee: \$25.00