L12000073268

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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2013 JUL 22 PN 1: 34
SECRETARY OF STATE

COVER LETTER...

TO: Registration Section Division of Corpo			
SUBJECT:	Hame of Limit	ne DOCCET,	LLC
The enclosed Articles of An	mendment and fee(s) are subj	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	Jan	nes Leavitt	
	Story	Firm/Company	LLC
	2903	Saranac Av	<u>e</u>
	West Pa	Im Beach, City/State and Zip Code	FL 33409
-	Storytime.	SOCCET & Lot robbe to be used for future annual eport notification	mil.com
For further information cond	cerning this matter, please ca	all:	
James Name of Po	<u>Leavitt</u>	at (<u>813)</u> 220 - S Area Code & Daytime Te	8166 dephone Number
Enclosed is a check for the	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 Fec, 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

< :

FILED 2013 JUL 22 PM 1: 34

SECRETARY OF STATES TALLAHASSEE, FLORIDA

Itory lime Joccer, 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 5/31/12 Florida document number 412000073268	and assigned
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 end with the words "Limited Liability Company," the designation "L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) West Palm Beach	ry Dr #550 , FL 33511
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) West Palm Beach	Dr #55c ,FL 33511
B. If amending the registered agent and/or registered office address on our records, enter registered agent and/or the new registered office address here:	the name of the new
Name of New Registered Agent: James Leavitt	
New Registered Office Address: 1186 Lake Terry Dr # Enter Florida street add	† 55 c
West Palm Beach, Florida_	
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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing B gistered Agent-Signature of New Registered Agent

Page 1 of 3

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

MGR = Manager

MGRM = Mai	naging Member			
<u>Title</u>	<u>Name</u>		Address	Type of Action
MMGR	Jesse	Cesaria	199 Wisconsin	Add Add
			Lake Worth, F	-L 33461X Remove
MMGR	James	Leavitt	1186 Lake Terry ! West Palm Beach), #55c X Add
			West Palm Beach	,FL Remove
				33511
		·		Add
				Remove
		•	 -	
				Add
				Remove
				Add
				Remove
		•		
				Add
		•		Remove

). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
·	
ated	7/16/13.
	Signature of a member or authorized representative of a member
	James Leavitt
	Typed or printed name of signee
	Page 3 of 3

1 450 5 61 5

Filing Fee: \$25.00

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