

L12000081286

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

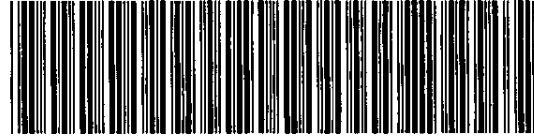
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 NOV 14 PM 2:02
CLERK OF STATE
TALLAHASSEE, FLORIDA

NOV 16 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 26, 2016

KELLETTE ROBINSON
700 E WASHINGTON ST, UPSTAIRS UNIT
UPSTAIRS UNIT
ORLANDO, FL 32801

SUBJECT: GRAFFITI JUNKTION 4, LLC
Ref. Number: L12000081286

We have received your document for GRAFFITI JUNKTION 4, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PAGE 2 IS MISSING

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 216A00022985

* ck # 4460 was included with original mailing

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Graffiti Junktion 4, LLC
Name of 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:

Kellette Robinson
Name of Person
Graffiti Junktion 4, LLC
Firm/Company
700 E Washington Street
Address
Orlando, FL 32801
City/State and Zip Code
Kellie@graffitijunktion.com
E-mail address: (to be used for future annual report notification)

RECEIVED
2016 NOV 14 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Kelli Robinson at (407) 245-7979
Name of Person Area Code Daytime Telephone 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 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

* already paid

15

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Graffiti Junktion 4, 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 06/19/2012 and assigned
Florida document number L12000081286.

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 Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

700 E. Washington St. Upstairs Unit

Orlando, Florida 32801

FILED
16 NOV 14 PM 2:02
CLERK OF CIRCUIT COURT
JANUARY 14, 2016
TALLAHASSEE, FLORIDA

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:

New Registered Office Address:

700 E Washington St. Upstairs Unit

Enter Florida street address

Orlando

, Florida

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, 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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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TALLAHASSEE, FLORIDA

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SECURITY OF STATE
ALLAHASSEE FLORIDA

(If an effective 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 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 11/02, 2016.

Kellee Robinson
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Kellette Robinson

Typed or printed name of signee