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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : THE SCHIFFMAN LAW GROUP, P.A.

Account Number : 120000000100 Phone : (305)682-1328 Fax Number : (305)682-0063

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GRAND TRACTOR SOUTH, LLC

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## **COVER LETTER**

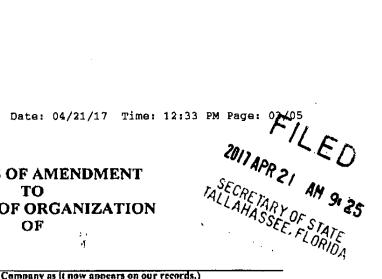
TO:	Registration Se Division of Cor			
SUBJ	Grand Trace	tor South, LLC		
3083	ECI:	Name of Limi	ited Liability Company	i arin
The en	iclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Picase	return all correspo	ndence concerning this matter	to the following;	
		Adam R. Schiffman, Esqui	rc	
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		The Schiffman Law Group	, P.A.	
		···	Firm/Company	
		2875 NE 191 Street, Suite	500	
		***************************************	Address	
		Aventura, FL 33180		
			City/State and Zip Code	·
		adam@realatty.net		
		E-mail address: (	to be used for future annual report notif	ication)
For fu	rther information c	oncerning this matter, please ca	al):	
Adam	R. Schiffman, Esq	uire	305 682-1328	
	Name o	f Person		Telephone Number
Enclo	sed is a check for th	ne following amount:		
□ s2	25.00 Filing Fee	S30.00 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 Tailahassee, FL 32301

To: 18506176383 From: 13056820063

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION



Grand Tractor South, LLC

(Name of the Ulmited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Con	npany were filed on 7/10/2012	and assigned
This amendment is submitted to amend the following:		
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."  The new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  The new mailing address, if applicable:		
The new name must be distinguishable and contain the words "Limited	d 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 ADDRE	<u> </u>	
Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office address	red office address on our records,	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
	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.

If Changing Registered Agent, Signature of New Registered Agent

To: 18506176383 From: 13056820063 Date: 04/21/17 Time: 12:33 PM Page: 04/05

, ,

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

Title	Name	Address	Type of Action
MGR	Natalia Alexeeva	4592 Reliant Road	
		Jamesville, NY 13078	■ Remove
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record speci The 90th day	fies a delayed eff after the record	ective date, but r is filed.	not an effective tir	me, at 12:01 a	.m. on the earli	ier o
ted April 17	2/1	, 2017	·			
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	Sign	niure of a member or an	thorized representative o	f a member		

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Filing Fee: \$25.00