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(Re	equestor's Name)		
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(Bu	usiness Entity Nar	me)	
(Document Number)			
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TALLANASSEE ELANGA SECRETARY OF STATE SECRETARY OF STATE

## **COVER LETTER**

TO:	Registration Se Division of Cor					
CHDH	KGMT LL	C				
SUBJI	ECI:	Name of Lim	ited Liability Company			
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		Kenneth R. Noble, III				
			Name of Person	•••		
		Noble Law Firm, P.A.				
			Firm/Company			
		6199 North Federal Highw	vay		SECRI	
			Address			7
		Boca Raton, FL 33487				ĭ
			City/State and Zip Code		108 1877 199	-
		E-mail address: (	to be used for future annual report notif	ication)	TE So	
For fur	ther information c	oncerning this matter, please c	all:			
Kenne	th Ray Noble, III		561 353-9300 at ()			
	Name o	f Person	Area Code Daytimo	: Telephone Number		
Enclos	ed 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)	Certified	te of Status &	

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

## TO ARTICLES OF ORGANIZATION OF

he Articles of Organization for this Limited Li orida document number	iability Company were filed on August	and assigned
orida document number	ability Company were med on	and assigned
	·	
nis amendment is submitted to amend the follo	owing:	
. If amending name, enter the new name of	the limited liability company here:	
ne new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation	ation "LLC" or the abbreviation L.L.C."
nter new principal offices address, if applica	able:	三
Principal office address MUST BE A STREE	T ADDRESS)	N. SEE
		PH ST
nter new mailing address, if applicable:		0 0
Mailing address MAY BE A POST OFFICE I		<u> </u>
Mailing address MAY BE A POST OFFICE I	or registered office address on our	<u> </u>
Mailing address MAY BE A POST OFFICE I	or registered office address on our fice address here:	<u> </u>
Mailing address MAY BE A POST OFFICE I	or registered office address on our fice address here: Kenneth R. Noble	records, enter the name of the
Aailing address MAY BE A POST OFFICE I	for registered office address on our fice address here:  Kenneth R. Noble 6199 North Federal Highway	records, enter the name of the
	for registered office address on our fice address here:  Kenneth R. Noble  6199 North Federal Highway  Enter Florida str	records, enter the name of the

## or removed from our records:

MGR = Manager AMBR = Authorized Member.

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	John M. Termotto	5435 Sea Biscuit Road	□ Add
		Palm Beach Gardens, FL 33418	<b>■</b> Remove
			Change
MGR	Michael J. Termotto	5435 Sea Biscuit Road	
	-	Palm Beach Gardens, FL 33418	■ Add
			Remove
			Change
			Add
			☐ Remove
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(If an effe	ve date, if other than the date of filing:	605.0207 (3 isted as th
	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.	rlier of:
Dated .	June 14, 2016.	
	Signature of a member or authorized representative of a member	
	'	
	Kenneth R. Noble, III  Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00