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(R	Requestor's Name)	
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(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(0	Ocument Number)	
Certified Copies	Certificates of	Status
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COVER LETTER

TO: Registration Section Division of Corpo			••
Division of Corporations SUBJECT: LED GVYS 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: Spyro MHKGS Jr. Name of Person LED GVYS LLC. Firm/Company We South Orange Ove. Address Orlandy FL 32801 City/State and Zip Code SPEEMER @ Gms.i. (om E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sym MHKGS Name of Person at (841) 833 - 1122 Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\int \text{\$\text{\$55.00 Filing Fee} \text{\$\text{\$Certificate of Status} \text{\$\text{\$\text{\$Certificate of Status} \text{\$\text{\$\text{\$\text{\$Certificate of Status} \text{\$\text{\$\text{\$Certificate of Status} \text{\$\text{\$\text{\$\text{\$\text{\$Certificate of Status} \text{\$\text{\$\text{\$Certificate of Status} \$\text{\$\te			
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	Spy100	MAKAS Jr. Name of Person	
	LLU	Firm/Company	
	Orlando,	FL 32801	
	SPEEMER	le Gmail. (om	
•	E-mail address: (I	to be used for future annual report not	ification)
5			
		at (<u>841)</u> <u>&33</u> Area Code Daytin	-17 22 De Telephone Number
Enclosed is a check for the f	ollowing amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LED GUYS	LLC.	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our record liability Company)	5.)
The Articles of Organization for this Limited Liability Company Florida document number 1200141105.	were filed on11/6/12	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC	1
Enter new principal offices address, if applicable:	Un Changed	NA
(Principal office address MUST BE A STREET ADDRESS)		·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	FILED T NOV 21 Th 1
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		, enter the name of the new
Name of New Registered Agent:	NA	
New Registered Office Address:	Enter Florida street addres:	•
	, Flo	orida 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

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jerrod Thompson	116 S. Grange ave.	🗆 Add
		orlando, FL 32801	Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
			Remove
			Change
			D Add
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Effect	ive date, if other than the date of filing:			
Note:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date			
docum	nent's effective date on the Department of State's records.			
he re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. o	on the e	earlie	r of:
The	90th day after the record is filed.			
Dated	11 15 17			
Dated				
	Signature of a member or authorized representative of a member		_	
	Spyro MAKIS	75		
	Typed or printed name of signee	~ , .		

Page 3 of 3

Filing Fee: \$25.00