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## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJE		Advisory Partners, LLC		
SUBJE		Name of Lim	ited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please i	eturn all correspo	ndence concerning this matter	to the following:	
		Timothy E. Bellon		
			Name of Person	
		SouthShore Advisory Parts	ners, LLC	
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	14 10 H - 10 H
		200 Frandorson Circle, Sui	te 200	
		<u> </u>	Address	
		Apollo Beach, FL 33572		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		btbellon@gmail.com		
		E-mail address: (	to be used for future annual report noti	fication)
For furt	her information co	oncerning this matter, please ca	all:	
Tim Be			813 326-7252 at ()	
	Name of	f Person	Area Code Daytim	e Telephone Number
Enclose	ed is a check for th	e following amount:	3	
\$25	5.00 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SouthShore Advisory Partners, LL							
(Name of the Lim	ited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)					
The Articles of Organization for this Limited I	Liability Company	were filed on January 8, 2013	and assigned				
Florida document number L13000004083	•						
This amendment is submitted to amend the fol	lowing:						
A. If amending name, enter the new name of	of the limited liab	oility company here:					
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."				
Enter new principal offices address, if applicable:		200 Frandorson Circle, Suite 200					
(Principal office address MUST BE A STREET ADDRESS)		Apollo Beach, FL 33572					
Enter new mailing address, if applicable:		200 Frandorsonc Circle, Suite 200 Apollo Beach, FL 33572					
(Mailing address MAY BE A POST OFFICE	<u> </u>		000				
B. If amending the registered agent and registered agent and/or the registered of							
Name of New Registered Agent:	Tim Bellon		8:49 19:49				
New Registered Office Address:	200 Frandorson	n Circle, Suite 200  Enter Florida street address					
	4 11 - D L		22572				
	Apollo Beach	, Florid	la 33572				

## 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	<b>Type of Action</b>
MGRM	Beth Bellon	200 Frandorson Circle, Suite 200	
		Apollo Beach, FL 33572	Remove
			Change
MGR	Tim Bellon	200 Frandorson Circle, Suite 200	□ Add
		Apollo Beach, FL 33572	□ Remove
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fective date, if other than to not effective date is listed, the date in this cument's effective date on the	nust be specific and block does not m	cannot be princet the appl	or to date of fil icable statute	ling or more tha	(option 90 days after tirements, this	filing.) Pursua	nt to 60 t be lis	5.0: ted
record specifies a delay The 90th day after the r		late, but n	ot an effe	ctive time,	at 12:01 a	.m. on the	e earli	ier
ted September 27	,	2017						

Page 3 of 3

Filing Fee: \$25.00