L13000008283

| (Requestor's Name) |
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| (Address) |
| (City/State/Zip/Phone #) |
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SEP 29 2020

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DATE:

9/28/20

NAME: ORANGE ENTERPRISES USA, LLC

TYPE OF FILING: ARTICLES

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE attack

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

ORANGE ENTERPRISES USA, LLC

22.7 SE1 28 Ki: 9:02 (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 <u>01/16/2013</u> | and assigned | |
|---|--|---|--|
| Florida document number L13000008283 | | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited liabi | lity company here: | | |
| The new name must be distinguishable and contain the words "Limited Liabili | ty 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) | | | |
| | | | |
| B. If amending the registered agent and/or registered office at agent and/or the new registered office address here: | ddress on our records, <u>enter</u> | the name of the new registered | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Florida street addre. | I address | |
| | FI | oridaZip Code | |
| N. B. G. L. B. G. | City | Zip Code | |
| New Registered Agent's Signature, if changing Registered Agent: | | • | |
| I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office a company has been notified in writing of this change. | performance of my duties, a rovided for in Chapter 605, | nd I am familiar with and F.S. Or, if this document is | |
| | | | |

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

| AMBR = . | Authorized Member | • | |
|--------------|-------------------|---------------------|--------------|
| <u>Title</u> | <u>Name</u> | Address 28 | Äii 9: 02 |
| MGR | TUFFIN, ROBERT | 1101 MIRANDA LANE | |
| | | SUITE 131 | ■ Remove |
| | | KISSIMMEE, FL 34741 | □Change |
| MGR MEDAI | MEDALIE, CHARLES | 1101 MIRANDA LANE | = Add |
| | | KISSIMMEE, FL 34741 | □ Remove |
| | | | □Change |
| | | | |
| | | | □Remove |
| | | | ☐ Change |
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| | Canal Land |
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| ective date, if other than the date of filing: | (optional) : prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 |
| e: If the date inserted in this block does not meet the a | pplicable statutory filing requirements, this date will not be listed |
| ument's effective date on the Department of State's rec | orus. |
| ord specifies a delayed effective date, but not an effect | tive time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| filed. | and the same of the same of the soundary and the |
| 28TH SEPTEMBED 2020 | |
| | |
| 28TH SEPTEMBER 2020 | |
| R-Tolk | |
| R-Tolk | authorized representative of a member |

Filing Fee: \$25.00