

L13000044432

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

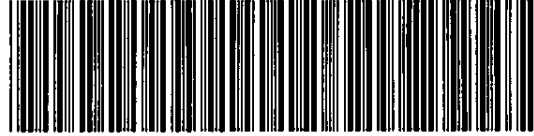
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900291656379

10/27/16--01017--00

DIVISION OF CORPORATIONS

16 OCT 27 15.05 PH 3:36

FILED

O SIMMONS  
NOV 01 2016

11/01/16

DEPOSITS/PAYMENTS DETAIL SCREEN

3:17 PM

DEPOSIT NUMBER : 10/27/16 01017 001

DEPOSIT TYPE : COR

ACCOUNT NUMBER :

DEPOSIT AMOUNT : 25.00

USER ID : EODOM

DEPOSIT BALANCE: 0.00

DEBIT MEMO DATE:

VOID DATE :

TRACKING NUMBER: 000291355970

DOCUMENT NUMBER: L13000044432

REQUESTOR :

LEDGER DATE : 10/27/16

SUB ACCT NUMBER:

CATEGORY

DESCRIPTION

AMOUNT

CF

ALL CORP FILING FEES

25.00

+ NEXT, - PREV, 1. MENU, 2. FILING, 3. MGR/MEM, 4. EVENTS

ENTER SELECTION AND CR:

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Shano, 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:

Shannon Dwigbo  
Name of Person

Shano, LLC  
Firm/Company

553D NE 53rd Terrace  
Address

High Springs, FL 32643  
City/State and Zip Code

ShannonDwigbo@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shannon Dwigbo at (386) 266-8834  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 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**

Shanoi, LLC

(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 3/25/2013 and assigned Florida document number L13000044432

This amendment is submitted to amend the following:

**A. 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."

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)

FILED  
16 OCT 27 PM 3:36  
DIVISION OF CORPORATIONS

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Shannon Ouwigho

New Registered Office Address:

5530 NE 53rd Terrace

Enter Florida street address

High Springs  
City

Florida

32643  
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.*

Shannon Ouwigho

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

Title	Name	Address	Type of Action
Owner	Shannon Overight	5530 NE 53 <sup>rd</sup> TERRACE High Springs, FL 32643	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

DIVISION OF BARTER OPERATIONS  
 16 OCT 2 16 PM 3:36  
 Remove  
 Change  
 Add  
 Remove

FILED

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

16 OCT 27 PM 3:36  
DIVISION OF REFORMS

FILED

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated \_\_\_\_\_

*Shannon Dwigho*

Signature of a member or authorized representative of a member

*Shannon Dwigho*

Typed or printed name of signee