113000053661

(Re	questor's Name)			
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·		
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
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COVER LETTER

TO: Registration S Division of Co			•
Ybor as SUBJECT:	nd More, LLC		
separati.	Name of Lin	nited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Richard Chad		
		Name of Person	
	Highland Properties of Ta	mpa Bay, Inc.	
	*	Firm/Company	
	1608 E. 5th Ave.		
		Address	
	Tampa, Fl 33605		
		City/State and Zip Code	
	highlandcompanies@verize	on,net to be used for future annual report noti	Contina
For further information of	concerning this matter, please c	·	nearony
Richard Chad		813 241-4787	
Name o	of Person		e Telephone Number
Enclosed is a check for t	he 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

Ybor and More, LLC				
(Name of the Limited Lia (A Flo	ibility Company as it now app orida Limited Liability Company	cars on our records.) y)		
The Articles of Organization for this Limited Liabilit Florida document number L13000053661	y Company were filed on	April 11,2013	and assigned	
This amendment is submitted to amend the following	y.			
A. If amending name, enter the new name of the	limited liability company	here:		
Tampasphere, LLC				
he new name must be distinguishable and contain the words "	Limited Liability Company," th	e designation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:				
Principal office address MUST <u>BE A STREET AD</u>	DRESS)		Cum Cum	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or registered agent and/or the new registered office a Name of New Registered Agent: New Registered Office Address:	egistered office address address here:		cn cr the name of the	
-	Enter F	Florida street address		
<u>·</u>		, Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Regist				
hereby accept the appointment as registered age provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chang	d complete performance d agent as provided for it tered office address, I het	of my duties, and I ai Chapter 605, F.S. (n familiar with and Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage	, <u>enter the title</u>	<u>, name, and</u>	address of each	person	being added
or removed from our records:					

MGR = Manager

AMBR = Authorized Member Address Type of Action <u>Title</u> <u>Name</u> □ Add ☐ Remove ☐ Change _□ Add ☐ Remove ☐ Change _□ Add _□ Remove ☐ Change □ Add ☐ Remove ☐ Change _□ Add □ Remove 2618 □ Change P- MU σ Ş: 12 □ Remove ☐ Change

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If an effective date is liste Note: If the date inser	d, the date must be specific and cannot rted in this block does not meet the date on the Department of State's	the prior to date of filing or more to e applicable statutory filing re		
	s a delayed effective date, ter the record is filed.	but not an effective time	e, at 12:01 a.m. on the	e earlier of:
Dated June 6	, 201	6		
	Kitch)	SSEE SSEE	TT.
	Signature of a member	r or authorized representative of a	member To	J
Richard	Chad		STATE ORIE	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00