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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LKM GROUP, LLC

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53

COVER LETTER

	LKM Grou	p, LLC	
UBJECT	:	Name of Limited Liability Company	
		· ·	
e enclos	ed Articles of	Amendment and fee(s) are submitted for filing.	
tase retu	n all correspo	ondence concerning this matter to the following:	
		Matthew Bishop, Esq.	
		Name of Person	
		Bishop & Bishop, P.L.	
		Firm/Company	
		6817 Southpoint Parkway, Suite 1004	
		Address Jacksonville, FL 32216-8201	
		City/State and Zip Code mbishop@bishoplaw.nct	
		E-mail address: (to be used for future annual report n	olification)
r further	information c	oncerning this matter, please call:	
latthew B	shop	904 519-1000	
	Name o	f Person Area Code Days	me Telephone Number

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

TO

ART	CLES OF C	RGANIZATION		
	0	F	2018 NOV	
			F 77	
LKM Group, LLC				
(Name of the Limit	ed Liability Compa (A Florida Limited)	ny 24 It now appears on our r Liability Company)		
The Articles of Organization for this Limited Li	ability Company	were filed on April 14, 20	13 En and resigned	
Florida document number L13000054784	·	,	FL 33	
This amendment is submitted to amend the following	wing:		• • • • • • • • • • • • • • • • • • • •	
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the w	ords "Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applica	able:	4391 South Highway 27		
(Principal office address MUST BE A STREET ADDRESS)		Clermont, Florida 34711		
Enter new mailing address, if applicable:		6817 Southpoint Parkway	, Suite 1004	
(Mailing address MAY BE A POST OFFICE BOX)		Jacksonville, FL 32216-8201		
B. If amending the registered agent and/or registered agent and/or the new registered off	or registered of fice address bere	fice address on our rec	ords, enter the name of the nev	
Name of New Registered Agent:	Matthew Bishop	, Esq.		
New Registered Office Address:	6817 Southpoint	Parkway, Suite 1004		
		Enter Florida street ac	ddress	
	Jacksonville		, Florida 32216-8201	
No Police No. 10 de la companya del companya del companya de la co		City	Zip Code	
New Registered Agent's Signature, if changing Re	egistered Agent:			

N

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.

Matth B. My

Page 1 of 3

11/27/2018 10:32AH FAX 9546414192 BLACKSTONE LEGAL SUPPLIE BLACKSTONE BLACKSTON

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u> Keith Vaskovsky	Address	Type of Action
MGR			D Add
			■ Remove
	Linda Vaskovsky		☐ Change
AMBR			D Add
			Remove
	MDP Group, P.L.	6817 Southpoint Parkway, Suite	Change
MGR	- Croup, F.E.	1004	
		Jackxonville, FL 32216-8201	□ Remove
			Change
			🗀 Add
			Remove
			☐ Change
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			Remove
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(b) The 90th day	after the record is fil	ed.	it 12:01 a.m. on the e	arlier of;
Dated November	26	2018		
	MB Bi	of dimember or authorized representative of a mer		<u>.</u>
Matthe	w B. Bishop, Sr.	Ontained of damentice representative of a ner		
		Typed or printed name of signce	A	
		Page 3 of 3	TALLAHASSEE, FL	
		Filing Fee: \$25.00		