# L13000083071

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<b>→</b> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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## **COVER LETTER**

TO:	Registration Sec Division of Corp		s Section Section	
SUBJE	ест: <u>А <sub>SC</sub></u>	2n Slow Cycle Name of Limit	Works ed Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		WASSAUGH	Name of Person	-d Page
		Ascension	CTUE WOCKS	
		1085 Ora	nge Wharf C	-ourt
		Winter Ga	City/State and Zip Code	787
		RHPage E-mail address: (to	o be used for future annual report notification	on)
For fur	ther information co	oncerning this matter, please ca	all:	(% <del></del>
R	i chard Name of	Page.	at ( <u>467)</u> <u>509-0</u> Area Code & Daytime Tel	lephone Number ASSET ARY
Enclose	ed is a check for th	ne following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

- Ascension Cycle	Work	· · · · · · · · · · · · · · · · · · ·
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on ou ted Liability Company)	r records.)
The Articles of Organization for this Limited Liability Comp	pany were filed on <u>June</u>	7 2013 and assigned
Florida document number <u>L 1300083071</u> .		
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 end with the words "L.L.C."	Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u></u>	
Enter new mailing address, if applicable:		AHASS UL STAND
(Mailing address MAY BE A POST OFFICE BOX)		
		FLORRI S
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		Öm 🚈
Name of New Registered Agent:		
New Registered Office Address:		The Property of the Control of the C
	Enter Flor	ida street address
		_, Florida
	City	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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	Name	Address <u>T</u>	ype of Action
MGR	Lora m Page	1085 Orange Wharf Court	- X Add
		Winter Garden, FL 34787	Remove
	_		Add
			Remove
			Add
			Remove
		SE SE	ಹ
		LAHAS	Addi
		SET F	Remove
		HASSEE, FLORIDA	15:
			Add
			Remove
			Add
			Remove

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	I want to make my wife Manager.
	Manager.
Dated	7/10/2013
	PARA
	Signature of a member or authorized representative of a member
	Richard Page
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00

13 JUL 15 PH 1: 54
SECRETARY OF STATE
JALLAHASSEE, FLORIDA