13000125606

(Re	questor's Name)	
(Ad	dress)	<u></u>
(Ad	dress)	
(Cit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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TO: Registration Section

١,,	Division of Corporations		7
CHDH	1442	Main	ctat 1

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:

Christopher Ssow
Firm/Company
313 Lookast Roint D.
Degrey F 34229
City Late and Zip Code Le'Sta Code E-mail address: (to be used for future annual report not fucation)
parning this matter places calls

For further information concerning this matter, please call:

Christopher Brown	at (441)	720-	77	7	Ċ
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

1448 Main Street, LLC		<u> </u>
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on September 5, 2013	and assigned
Florida document number L13000125606	·······	東部 20
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	<u> </u>
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 add		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	
	City , Florida	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.

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Christopher J. Brown	313 Lookout Point Dr., Osprey FL.	∑ Add
			Remove
			☐ Change
MGR	Javier (Mike) Granthon	1448 Main St., Sarasota, FL 34236	DAdd
			Remove
			□ £ nange
			□ Shange NO Vide □ Co
			□ Remove
	•		S S S S S S S S S S S S S S S S S S S
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	s a delayed effec ter the record is		not an effectiv	ve time, at 12:0) 1 a.m. on the	earliei
		2016	· ·			
November 21,	(1				
November 21,		<u> </u>	uthorized represent			

Page 3 of 3

Filing Fee: \$25.00