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SECRETARY OF STATE TALLAHASSEE, FLORIDA

OLVISION OF CORPORATION 15 JUN 18 AM 10: 50

JUN 1 9 2015

MARONI S

COVER LETTER

Division of Corporations							
SUBJECT: Venice Park Road, 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:							
John McIntosh Name of Person							
Venice Park Road, LLC.							
1999 W. Fairbanks Ave							
Winter Park FL. 32789 City/State and Zip Code							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Tohn McTntosh at (407) 257 - 6642 Name of Person Area Code Daytime Telephone Number							
Enclosed is a check for the following amount:							
\$25.00 Filing Fee Scrifficate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Certified Copy (additional copy is enclosed)							
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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

T0:

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 15 JUN 18 AM 10: 50

SECRETARY OF STATE DIVISION OF CORPORATIONS

TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Park Ro Liability Company as Florida Limited Liabili	it now appears on or	ir records.)		
The Articles of Organization for this Limited Liab Florida document number	ility Company were	e filed on \\\	11/13	and assigne	ed
This amendment is submitted to amend the follow	ing:				
A. If amending name, <u>enter the new name of th</u>	re limited liability	company here:			
The new name must be distinguishable and contain the word	ls "Limited Liability Co	ompany," the designat	ion "LLC" or the al	bbreviation "L.L.C.	"
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET)					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO					
B. If amending the registered agent and/or		address on our	records, <u>enter</u>	the name of	 <u>the ne</u>
registered agent and/or the new registered offic	<u>e address here</u> :		SECR	SECRE VISION	
Name of New Registered Agent:		1	HASSE	N OF CL	
New Registered Office Address:		Enter Florida str	eet address The Silver	CREORATION 5	<u> </u>
	<u></u>	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 th 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 Adent 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>Address</u> Type of Action <u>Name</u> □ Remove ☐ Change □ Add ☐ Remove _□ Change _□ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Remov □ han ge 🗆 Add 😤 ☐ Remove

□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Please make sure Jimmy Lile
is Listed on SunBiz as a signing
agent, immediately. He was listed Mevi
but is still not listed on Sunbizas
a Signing Member. This was submitted
earlier this year.
E. Effective date, if other than the date of filing:
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.
document's effective date on the Department of State's fectords.
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.
SSE SSE
Dated
Mohan HAVIATION STATE
Signature of a member or authorized representative of a member
Taka M. Taka
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00