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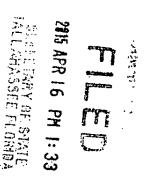
(Re	equestor's Name)		
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PICK-UP	☐ WAIT	MAIL	
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Certified Copies	Certificates of Status		
Special Instructions to	Filing Officer:		

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Angle 972 71C 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:
Antoine Gendre Name of Person
Firm/Company
805 N Andrews All
FOG + 1 auder dale F2.33371 City/State and Zip Code An +orne and City/State and Zip Code E-mail address! (to be used for future annual seport notification)
For further information concerning this matter, please call:
Antoine Gendre at (954) 530 1337 B Name of Person at (954) 530 1337 B Area Code Daytime Telephone Number B The Person B The
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status □ \$30.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & □ \$60.00 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

_	O1				
Name of the Limi	Q 72 2 ted Liability Company (A Florida Limited Liab	as it now appears on our re	cords.)		
The Articles of Organization for this Limited L	Liability Company we	ere filed on _\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ر۱ د	and assigne	ed
Florida document number <u>1300</u>	5170 IDO	1			
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name of	of the limited liabilit	y company here:			
, <u></u>					
The new name must be distinguishable and end with the	words "Limited Liability	y Company," the designation	"LLC" or the abb	previation "L.L.(7."
Enter new principal offices address, if appli	cable:				
(Principal office address MUST BE A STRE	_				
Enter new mailing address, if applicable:	_			27 m	η
(Mailing address MAY BE A POST OFFICE	(BOX)			20 -	ACES:
	-		රුණ (2) 	ြုံ တ	
			in (T,
B. If amending the registered agent and registered agent and/or the new registered of		ce address on our rec	ords, enter ti	7.5	the new
				# 33 F	
Name of New Registered Agent:	Antoir	u Gend	ol		
New Registered Office Address:	805 N	Andrews Enter Florida street a	S Aug		
	FOST law	der dale	_ Florida	33311 Zip Code	
		City		Lip Couc	

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			Add
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Note: If the date inse	her than the date of filed, the date must be specific erted in this block does not date on the Department of	ot meet the applicable	late of filing or more than e statutory filing requir	(optional) 90 days after filing.) Pu ements, this date will	rsuant to 605.0207 not be listed as	(3)(b) the
f the record specifie b) The 90th day af			n effective time, a	it 12:01 a.m. on	the earlier of	:
Dated An	16	. <u>2015</u>				
0						
	Signature o	of a member of authoriz	ed representative of a me	mber		

Page 3 of 3

Filing Fee: \$25.00