

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ROBERTS, SEWARD & COMPANY PA

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Phone : (813)225-1040 Fax Number : (813)221-3135

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RAROTH, LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

company has been notified in writing of this change.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

raroth, llc				
(Name of the Lim	ited Liability Compan (A Florida Limited Li	y as it now appears on our record ability Company)	(s.)	
The Articles of Organization for this Limited I Florida document number L13000158576	Liability Company v	vere filed on 11/12/2013	and	assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name (of the limited liabili	ty company here:		
The new name must be distinguishable and contain the	words "Limited Liabilit	Company," the designation "LLC	" or the abbreviation	"L.L.C."
Enter new principal offices address, if applications	cable:			
(Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	BOX)			
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:		ce address on our records	s, enter the nan	ie of the new
	509 E. Jackson St	ret		Ht. ga
New Registered Office Address:	Tampa	Enter Florida street addres	r	5
		Chy	orida 33602 5 5p_Co.	de 🔫
New Registered Agent's Signature, if changing	Registered Agent:		, and the second	8
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the abligations of my position as regi being filed to merely reflect a change in the	er and complete po Stered agent as pro	erformance of my duties, an ovided for in Chapter 605, .	nd I am familiar v F.S. Or, if this do	vi th and concurrent is

Page 1 of 3

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

Title	Name	Address	Type of Action
Mgr	Christopher Goslin	509 E. Jackson Street	Add
		Tampa, FL 33602	≅ Remove
			Change
Mgr.	Randy Speed	509 E. Jackson Street	Add
		Tampa, PL 33602	□ Remove
			☐ Change
		Add	
			□ Remove
			Change
			□ Add
			Remove
			Change
			SST Add
			Remove C
			Add
			□ Remove
			Chause.

26-15 15:33	FROM-roberts, seward, speed	8132213135	T-063 P004/0
ending any othe	er information, enter change(s) here	: (Attach additional sheets, ly	f necessary.)
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			意式 乙
			S = 5
			35 · 5
fective date is listed, If the date inserte	than the date of filing: the date must be specific and cannot be prior to d in this block does not meet the applica	date of filing or more than 90 days	(optional) s after filing.) Pursuant to 605 s, this date will not be liste
nent's effective dat	te on the Department of State's records.		
cord specifies a 90th day afte	a delayed effective date, but not r the record is filed.	an effective time, at 12:	01 a.m. on the earlie
May 26	2015	_•	
		_	
	Signature of a member or author	ized representative of a member	
Randy Speed	1		

Page 3 of 3

Filing Fee: \$25.00