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## **COVER LETTER**

Division of Corporations
SUBJECT: Applied Junamix 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:
David Baitinger
APPLIED DYNAMIX LLC
Do Box 133427
HIALRAIT FL 33013-3427
High Least FL 33013 - 3427  City/State and Zip Code  David Bo April En Dynamix. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
+ 0
DAVID KAITINGER at (305) _ 835.2500
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  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

APPLICO TO (Name of the Limited Liability	DYNAMIX LLC	records )
(A Florida L	imited Liability Company)	111111111111111111111111111111111111111
The Articles of Organization for this Limited Liability Cor Florida document number <u>L 13 000 16 5 6 3</u>		5 Z013 and assigned
This amendment is submitted to amend the following:	bility Company as it now appears on our records.  (Company were filed on 11/25/2013 and assigned 377  imited liability company here:  Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  NA  DRESS)  gistered office address on our records, enter the name of the riew ddress here:  NA  Enter Florida street address  City Zip Code	
A. If amending name, enter the new name of the limite	ed liability company here:	
N/A		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRE	<u>(222)</u>	
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX)</u>	~ (A	`F*4
B. If amending the registered agent and/or registe	red office address on our re	cords, enter the name of the new
registered agent and/or the new registered office addre	ess here:	) IAIC ORIDA
Name of New Registered Agent:	N (H	
New Registered Office Address:	N A	addrass
	Eriser I' sur sale sur eei	
	City	<u> </u>
Now Degistered Agent's Signature if changing Degistered	·	Light Comment.

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> **Address Type of Action** Gral Gables PRemo AMBR Browla Bly \_D Remove EL 33146-2616 ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove DRIDA Change □ Add □ Remove ☐ Change □ Add ☐ Remove

Page 2 of 3

☐ Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Pro .
SSE 30
Effective date, if other than the date of filing: MAY 25, 2017 (optional)
Effective date, if other than the date of filing:
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  ) The 90th day after the record is filed.
Dated MAY 25, 2017. Bautyer
Signature of a member or authorized representative of a member
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00