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D. BRUCE DEC 08 2016

## **COVER LETTER**

Division of Corporations	
SUBJECT: Gypsy Sc	ame of Limited Liability Company
The enclosed Articles of Amendment and feet	(s) are submitted for filing.
Please return all correspondence concerning t	his matter to the following:
1746 Medir	Ryan Dean Name of Person  1 PSY Souls Coffee house UC. Firm/Company  5 Gulf Rud  Address  City/State and Zip Code  Sdean 81 Ogmail.com  I address: (to be used for future annual report notification)  1, please call:  at (727) 365-1209  Area Code  Daytime Telephone Number
Enclosed is a check for the following amount	
□ \$25.00 Filing Fee □ \$30.00 Filing Certificate of	
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Lia Florida document number	ability Company were filed on 2 December 2013 and assigned 082.
This amendment is submitted to amend the follo	wing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ible:
(Principal office address MUST BE A STREET	T ADDRESS)
	or registered office address on our records, enter: the name of the new
registered agent and/or the new registered of	fice address here:
Name of New Registered Agent:	hyan S. Dean
New Registered Office Address:	Pedington Shores, Florida 33708
	Bedington Shores, Florida 33708
	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 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 = Au	ithorized Member	•	
<u>Title</u>	Name	Address	Type of Action
MGR	Erin Godfrey	505 N. Jefferson Ave Clearwater FL 33755	
	,	Clearwater FL 33755	Remove
			Change
MOR	RIAN S. DEAN	13920 89th Ave	Add
		Seminole FL, 33776	□ Remove
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Filing Fee: \$25.00