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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

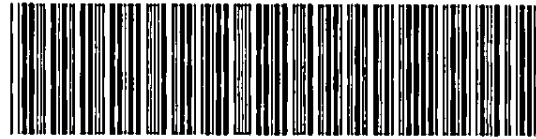
(Business Entity Name)

(Document Number)

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04/29/19--01001--020 **25.00

April 24, 2019

Via US First Class Mail

Florida Department of State
Registration Section
PO Box 6327
Tallahassee, FL 32314

Re: Maintenance Manager, LLC

To Whom It May Concern,

Please accept this letter as our request to file the following enclosed document:


- Articles of Amendment of the Articles of Organization (2 copies).

I have enclosed a check, number 8861 in the amount of \$25.00 to cover the filing fee associated therewith. Please file the enclosed document as soon as you are able and return a date stamped copy to me in the self-addressed, stamped envelope provided.

Thank you for your attention to this matter.

Very truly yours,

YORK HOWELL & GUYMON



Spencer Witt, Esq.
Associate to Andrew L. Howell, Esq.
ALH/sw
Encs.

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

The Maintenance Manager, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on December 19, 2013 and assigned
Florida document number L13000175441

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

238 Sophia Terrace
St. Augustine, FL 32095

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Gregroy S. Clifton	280 Business Park Circle Suite 415	<input type="checkbox"/> Add
		St. Augustine, FL 32095	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Eva Clifton	238 Sophia Terrace	<input type="checkbox"/> Add
		St. Augustine, FL 32095	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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