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COVER LETTER

TO:	Registration Se Division of Cor			
	LB Uno, LI	.c		
SUBJ	ECT:	Name of Lim	ited Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
		Gary Jenkins		
			Name of Person	
		LBox Development, LLC		
			Firm/Company	
		761 Island Way		
			Address	
		Clearwater, FL 33767		
		gjenkins@lboxdevelopmen	City/State and Zip Code L.com	
		E-mail address: (to be used for future annual report	notification)
For fu	orther information co	oncerning this matter, please ca	all:	
Gary	Jenkins		904 536-3534 at ()	i.
	Name o	f Person		time Telephone Number
Enclo	sed is a check for th	ne following amount:		
⊞ \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS:		•	URIER ADDRESS:	
Registration Section Division of Corporations			Registration Se Division of Co	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Buildin 2661 Executive	ਨ -	
	ा साधार	15000, FL 52514	Zoor executive Tallahassee, FI	

ARTICLES OF AMENDMENT TO | ARTICLES OF ORGANIZATION OF

LB Uno, LLC	1			
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on our re nability Company)	cords.)	
The Articles of Organization for this Limited L Florida document number 1.13000177330	iability Company	were filed on	and assigned	
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility:company here:		
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applie	cable:	701 S Howard Ave	18	
(Principal office address MUST BE A STREE	ET ADDRESS)	Strite 101		_
		Tampa, FL 33606	10 to	;
Enter new mailing address, if applicable:		701 S Howard Ave	<u> </u>	
(Mailing address MAY BE A POST OFFICE	BOX)	Suite 101		_
		Tampa, F1.33606		G
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:			ords, enter the name of the new	
New Registered Office Address:	701 S Howard A	Ave, Suite 101		
THE REGISTERE OF THE PRESEST.	Enter Florida street address		ddress	
Clearwater				
		City	Zip Code	
New Registered Agent's Signature, if changing				
I hereby accept the appointment as registered provisions of all statutes relative to the projection as registered accept the obligations of my position as registered.	per and complete	p e rformance of my dutie.	s, and I am familiar with and	

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 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> Name Address Type of Action Bozo, Lubo MGR 140 Island Way _□ Add Box 223 Remove Clearwater, FL 33767 ☐ Change MGR Lubomadis Bozo-Diaz 701 S Howard Ave ■ Add Suite 101 ☐ Remove Tampa, FL 33606 ☐ Change 701 S Howard Ave. AMBR Gary Jenkins ■ Add Suite 101 □ Remove Tampa, FI 33606 _□ Change □ Add _□ Remove _□ Change _□ Add □ Remove ☐ Change _□ Add □ Remove ☐ Change

). İfan	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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(If an e	tive date, if other than the date of filing: (optional) frective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant	io 605.020	7 (3)(b)
Note docu	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.	e listed a:	s the
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ϵ	arlier c	of:
b) Th	e 90th day after the record is filed.		
Date	d		
	(Sionen & Borro		
	Signature of a member or authorized representative of a member	_	
	Lubomadis Bozo-Diaz		
	Typed or printed name of signee	_	
	Page 3 of 3		
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Filing Fee: \$25.00