L14000004432

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busir	ness Entity Nar	ne)
(Docu	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	-

Office Use Only



500255276025

01/24/14--01011--016 **25.00

2014 JAN 24 FN 3: 30 SHOVELVEY OF STATE

JAN 29 2014

COVER LETTER

TO:	Registration Sect Division of Corpo				
SUBJE	Step I	nto Liquid LL	С		
SUBJE	<u>.</u>		ited Liability Company		
The end	closed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspond	dence concerning this matter	to the following:		
		Andrew Buc	hner		
			Name of Person		
		Step Into Lic	quid LLC		
			Firm/Company		
		550 S. Exete	er St.		
			Address		
		Eustis FL, 3	2726		
			City/State and Zip Code		
		aguitardrewbusine	ess@yahoo.com to be used for future annual re	enort notification)	
For furt	her information cor	cerning this matter, please ca		eport notification	
And	drew Buc	hner	_{at} (352 ₎ 21	17-4029	
	Name of F	erson	Area Code	Daytime Telepho	ne Number
Enclose	d is a check for the	following amount:			
■ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo		\$60.00 Filing Fee, Certificate of Status & 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

FILED 2014 JAN 24 PN 3: 30 Signature

SECRETARI DE STATE TALLAHASSEE, FLORIDA

Step into Liquid LLC		
(<u>Name of the Limited I</u> (A l	liability Company as it now appears on our recor Florida Limited Liability Company)	<u>'ds.</u>)
The Articles of Organization for this Limited Liabi Florida document number L1400004422		and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and end with the word	ds "Limited Liability Company," the designation "Li	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	(DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ds, enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street addre	ess
_		lorida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Stop Into Liquid I.I.C

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Karl Buchner	550 S. Exeter St.	Add
		Eustis FI, 32726	Remove
			□ Add
			□ Remove
			□ Remove
			□ Add
			□ Remove
			
			Remove
			 □ Add
			□ Remove

If amending any other information, enter change(s) here: (Attach a	dditional sheets, if necessary.)
<u></u>	
Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of receipt or filed date and cathe date this document is filed by the Florida Department of State)	(optional) annot be more than 90 days after
Dated January 21 2014	
Curk	
Signature of a member or authorized represer Andrew Buchner	ntative of a member
MINIEW BUCHIE	

Page 3 of 3

Filing Fee: \$25.00

