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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

907 SOUTHEAST BYWOOD AVE, 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:

P.L. Braswell

Name of Person

Firm/Company

3309 Northlake Blvd., Suite 107

Address

Palm Beach Gardens, FL 33403

City/State and Zip Code

fipstrick@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

P. L. Braswell

_{at} 561 625-6255

Name of Person

Area Code

Daytime Telephone Number

Enclosed 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 enclosed) □ \$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

907 Southeast Bywood Ave, LLC

(<u>Name of the Limite</u> ()	I Liability Compar A Florida Limited L	y as it now appears on our records.) iability Company)			
The Articles of Organization for this Limited Lia Florida document number L14000028772	bility Company	were filed on 02/19/2014	and :	assigned	d
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of	the limited liabi	lity company here:			
The new name must be distinguishable and end with the w	ords "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation	ı "L.L.C.	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		3309 Northlake Blvd., Suite 107			
		Palm Beach Gardens,	FL 33403		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3309 Northlake Blvd., Suite 107			
		Palm Beach Gardens, FL 33403			
B. If amending the registered agent and/o registered agent and/or the new registered offi			nter the nam	ne of tl	he new
	P.L. Brasw	voll.	が 調(-5	
Name of New Registered Agent:				يددر	
New Registered Office Address:	3309 North	nlake Blvd., Suite 107 Enter Florida street address	<u> </u>	7-72 7-3	****
	Palm Reac				
	T diff boat	City , Florid	1a 33403 Zip Cod	de ;	
New Registered Agent's Signature, if changing Re	gistered Agent:		නි.) වැඩ	(<u>40</u>)	
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of this company.	r and complete p ered agent as p egistered office o	performance of my duties, and I rovided for in Chapter 605, F.S address, I hereby confirm that th	am familiar v . Or, if this do he limited lial	with an ocumen	d

Page 1 of 3

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 **Title** Name Address **Type of Action** P.L. Braswell 3309 Northlake Blvd. MGR Add Suite 107 □ Remove Palm Beach Gardens, FL 33403 P.L. Braswell 3309 Northlake Blvd. AMBR Add Suite 107 ☐ Remove Palm Beach Gardens, FL 33403 Vito S. Pantilione 601 Delsa Drive **MGR** □ Add Sewell, NJ 08080 Remove Ralph Gallo 601 Delsa Drive **MGR** □ Add Sewell, NJ 08080 Remove ☐ Remove □ Remove

•		<u> </u>
Effective date, if other than the date	e of filing:	(optional)
Effective date, if other than the date (The effective date must be specific, cannot be the date this document is filed by the Florida	prior to date of receipt or filed date and cannot be more	(optional) than 90 days after
(The effective date must be specific, cannot be the date this document is filed by the Florida	prior to date of receipt or filed date and cannot be more	(optional) than 90 days after
Dated May 16	prior to date of receipt or filed date and cannot be more Department of State)	than 90 days after

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Filing Fee: \$25.00