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ZOUT APR 28 PH 3: L.J.
SECRETARY OF STATE

K. SALY MAY -1 2017

## **COVER LETTER**

TO:	Registration Sec Division of Corp			
SUBJE	ECT:	REEL BELIEU? Name of Limi	ited Liability Company	
The en	closed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspor	dence concerning this matter	to the following:	
		REL BELIEUEZ J T LLC, Name of Limited Liability Company  les of Amendment and fee(s) are submitted for filing.  rrespondence concerning this matter to the following:  ROBERT SIMPKINS  Name of Person  Firm/Company  SI SW RIVERWAY BLUD  Address  PALM CITY FL 34996  City/State and Zip Code  ROBRSIMPKINS OF GMAIL. Com  E-mail address: (to be used for future annual report notification)  tion concerning this matter, please call:  SIMPKINS  at (772) 708-0775  Jame of Person  at (772) Tost-0775  Jame of Person  Area Code  \$30.00 Filing Fee & Certificate of Status & Certified Copy  (reddifficant copy is enclosed)  Certificate of Status & Certified Copy  Certificate of Status & Certified Copy  Certificate of Status & Certified Copy  Certificate of Status & Certified Copy		
			Firm/Company	
		SI SW RI	VERWAY BLUD Address	
		PALM	CITY FL 349° City/State and Zip Code	96
The enclose Please retur		ROBR E-mail address: (0	SIMPKINS @ GMAI	L. Com
For furt	ther information co	ncerning this matter, please ca	all:	
	ROB SIA Name of	NPKINS Person	at (772) 708- Area Code Daytime	- 0775 Telephone Number
Enclose	ed is a check for the	e following amount:		
<b>₹ \$</b> 25	5.00 Filing Fee		Certified Copy	Certificate of Status &

**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

ZOIT APR 28 PH 3: 4.1

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REEL BELIEL	Company as it now appears on our records.)  Company as it now appears on our records.)  Company as it now appears on our records.)  Company as it now appears on our records.)
	Company as it now appears on our records.) mited Liability Company)
	LORIDA
The Articles of Organization for this Limited Liability Com	npany were filed on 03/03/2014 and assigned
Florida document number <u>L14060636590</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	<u> </u>
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or register registered agent and/or the new registered office addres	ed office address on our records, enter the name of the new
	<u> </u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
<del> </del>	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 **Title** <u>Name</u> Type of Action 2025 NE RIVER COURT. AMBR BARRY VAN WAGNER JENIEN BEACH, FL 34957 Add Add ☐ Remove ☐ Change □ Add ☐ Remove □ Change □ Add □ Remove □ Change □ Add ☐ Remove ☐ Change ☐ Add □ Remove ☐ Change

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f an ci Note:	tive date, if oth ffective date is listed If the date inser ment's effective d	i, the date must be ted in this block	specific and cand do	annot be prior to et the applicab	date of filing or le statutory fili	more than 90 days	optional) after filing.) P , this date w	rursuant to 605.0 ill not be listed	207 ( l as t
	ecord specifies e 90th day aft			te, but not	an effective	time, at 12:	01 a.m. or	the earlier	of:
Dated	i	L 24 th		2017					
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