114000037969

(R€	equestor's Name)	
(Ad	ldress)	
	Idra a	
(70	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
<i>(</i> —	omes army run	no,
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	JUN - 5 201	\$
	A. LUNT	

Office Use Only



000260565560

05/27/14--01038--016 **30.00

2111 MY 27 PH 3:32

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our reconciability Company)	rds.)
The Articles of Organization for this Limited Liability Company Florida document number 14-37969.	were filed on 3/14/100/	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "L	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	937 Maraneur	F5/5 3
(Principal office address MUST BE A STREET ADDRESS)	FT LANGUARIE	
	33315	P.S. D. France
Enter new mailing address, if applicable:		1: 1
(Mailing address MAY BE A POST OFFICE BOX)		
		;
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
		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

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Daviel (Shelan	937 MANONRIM FELE	D Add
		737 MANDRIN FILE FT LANGENAKE, FI 33315	□ Remove
		33315	214
AGR		7	Q Add
			Remove
			32 33 34 35
MBR	TRACEY WHEAN	937 MANDROW FUE FT LADOUDINE, FI	🗹 Ádd
		FT LADOUNALE, FI	Remove
		33315	
			☐ Remove
			Add
			☐ Remove
		····	
			□ Remove

ADDING	AUTHORIZED MEMBER	
		- .
ective date, if other than the effective date must be specific, car	e date of filing: (optional) not be prior to date of receipt or filed date and cannot be more than 90 days after	_
date this document is filed by the F		
·		
·		
·		
ted	Signature of a member or authorized representative of a member	

Page 3 of 3

[]

Filing Fee: \$25.00