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03/20/14--01008--017 **25.00

COVER LETTER

то:	Registration Sec Division of Corp			•
SUBJE	ст: <u>ВЕ</u>	SERVICE Name of Lim	ited Liability Company	
The enc	losed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspon	dence concerning this matter	to the following:	
		Seth	Bobker Name of Person	
			Firm/Company	
		2510 S.W.	15th Street	
		Deer Gleld	Beach FL 3344 City/State/and Zip Code	2
		Sbobker/16 E-mail address: (1	DVahoo. Com tybe used for future annual report notifica	tion)
For furtl	ner information co	ncerning this matter, please ca	all:	
<u>Se</u>	H Bo	Ker Person	at (321) 279- Area Code Daytime To	-1156 elephone Number
Englose	d is a check for the	following amount:		
½ \$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

Name of the Lin	nited Liability Company as it now (A Florida Limited Liability Com	appears on our records.	
	(A Florida Limited Liability Com	1 1	
The Articles of Organization for this Limited	Liability Company were filed	on <u>3/13/2014</u>	and assigned
Florida document number <u>L/4000</u>	142245		
This amendment is submitted to amend the fo	ellowing:		
A. If amending name, enter the new name	of the limited liability compa	iny here:	
The new name must be distinguishable and end with the	ne words "Limited Lighility Compan	y" the decignation "I I C" or the	a abbroviation "L. C."
		y, the designation LLC of the	addicviation E.E.C.
Enter new principal offices address, if appl	licable:		
(Principal office address MUST BE A STRE	EET ADDRESS)		
			<u> 54 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - </u>
			## S
Enter new mailing address, if applicable:			· "D
• • • • • • • • • • • • • • • • • • • •			
(Mailing address MAY BE A POST OFFICE	<u></u>		
			<u> </u>
D. Te		•	>>
B. If amending the registered agent an registered agent and/or the new registered		ess on our records, <u>ente</u>	r the name of the ne
egistered agent and or the new registered	omee address here.		
Name of New Registered Agent:	Seth Bobke	21	
New Registered Office Address:	25/0 S.W. 1	5th Street	
	Doer field Roa	ter Florida street address Florida	33442
	City	, Fiorida <u>C</u>	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 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 = Man AMBR = Aut	ager horized Member		
Title MGRM	Name Seth Bobker	Address 2510 S.W. 15th Street Deerfield Beach, FL 3344;	Add Remove
			_□ Add
		<u> </u>	_□ Add _□ Remove
			_ _□ Add _□ Remove

mending any other information, enter change(s) here: (Attach ad	ditional sheets, if necessary.)
ctive date if other than the date of filing:	(optional)
ffective date must be specific, cannot be prior to date of receipt or filed date and can	(optional) not be more than 90 days after
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ffective date must be specific, cannot be prior to date of receipt or filed date and can late this document is filed by the Florida Department of State)	anot be more than 90 days after
effective date must be specific, cannot be prior to date of receipt or filed date and can date this document is filed by the Florida Department of State) and 3/14/2014, SB. Bolker	anot be more than 90 days after

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Filing Fee: \$25.00