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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : DAVID R. CARTER, P.A.

Account Number : I20010000053 Phone

: (352)686~6278

Fax Number

: (352)686-7324

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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(FAX)

H160002398583 ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

P.002/004
2016 cm FILED
OFP 1
PALLAHASSEE, FLORIDA
Tr. Fl. ORIDA

		WASH, LLC		" (1.0p)
(Name of the Lin	(A Florida Limited	nny as It now annears on Liability Company)	our records.)	
The Articles of Organization for this Limited Florida document numberL14000057099	Liability Company	were filed on Apri	18, 2014	and assigned
his amendment is submitted to amend the fo	llowing:			
A. If amending name, <u>enter the new name</u> N/A	of the limited link	ility company here:		
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design	nation "LLC" or the a	bbreviation "L.L.C."
Entor new principal offices address, if appl	icable:	N/A		
Principal office address MUST BE A STRE	ET ADDRESS)			
Enter new mailing address, if applicable:		N/A		
<u>Malling address MAY BE A POST OFFICI</u>	<u> BOX)</u>			
3. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	il/or registered of office address her N/A	Mice address on ou	r records, enter	the name of the
	****		- · · ·	
Many Designand Affice Address.	N/A		New Registered Office Address: Enter Florida street address	
New Registered Office Address:	N/A	Enter Florida s	ireet address	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	N/A	Enter Florida s	reet address	Zip Code

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

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09/27/2016 11:15 H16000 R348583

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

<u>Title</u>	Name	Address	Type of Action
MGR	JAIME GUZIK	12229 MANGO COURT	
	·	SPRING HILL, FL 34809	₽ Remove
			Change
MGR	JOANNE ZARRILLO	5077 FLORENTINE COURT	■ Add
		SPRING HILL, FL 34608	□ Remove
		· · · · · · · · · · · · · · · · · · ·	Change
MGR	MEGHANN ZARRILLO	5384 SLATER ROAD	
		SPRING HILL, FL 34608	□ Remove
			□ Change
			22 Add AH
			Remove Go Change
			D Add
			☐ Remove
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ective date, if other than the date of filing:	(optional) or to dute of filing or more than 90 days after filing.) Pursuant to 605,02
e: If the date inserted in this block does not meet the application.	cable statutory filing requirements, this date will not be listed
ument's effective date on the Department of State's records	
record specifies a delayed effective date, but no ne 90th day after the record is filed.	ot an effective time, at 12:01 a.m. on the earlier
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SEPTEMBER 2016	
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Signature of a member or auth	norized representative of a momber
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