L14000059756

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AUG 1 9 2018 T. LEIMEUX

COVER LETTER. . .

Division of Corp	orations		
FLAME IN	VEST LLC		
SUBJECT:		III Like Company	
	Name of Limit	ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspor	idence concerning this matter to	o the following:	
•	PEYRONNET, Francis		
		Name of Person	
	FLAME INVESTILLE		
		Firm/Company	
	957 route d'Faunes		
		Address	
	31870 Beaumont sur Lèze	, FRANCE	
		City/State and Zip Code	<u> </u>
	francis.peyronnet@icloud.c		
	E-mail address: (t	o be used for future annual report notific	eation)
For further information c	oncerning this matter, please ca		
PEYRONNET, Francis		813 580 9709	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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:

TO:

Registration Section

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

FLAME INVESTILLC

company has been notified in writing of this change.

FILED

(Name of the Limited	Liability Compan Florida Limited Li	y as it now appears ability Company)	2019 AUG 13	P 2-32
The Articles of Organization for this Limited Lial 1.140.00059756 Florida document number	bility Company v	vere filed on	TALLAHASSEI	<u>OF</u> STASSigned E. FLORIDA
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of	the limited liabil	lity company her	<u>¢</u> :	
			at t ever a should	Shrangation "L. I. C."
The new name must be distinguishable and contain the wo	rds "Limited Liabili	ty Company," the de-	signation "LLC" of the ar	spreviation 1. i. C
Enter new principal offices address, if applica		7901 4th St. N.	Suite 300	
(Principal office address MUST BE A STREET ADDRE		St. Petersburg, I	1,33702	
B. If amending the registered agent and/registered agent and/or the new registered of	or registered of	<u>e</u> :	our records, enter	the name of the new
Name of New Registered Agent:	7901 4th St. N			
New Registered Office Address:	7701 401 50 .5		ida street address	
	St. Petersburg		Florida	33702 Zip Code
		City	<u> </u>	7sp Code
New Registered Agent's Signature, if changing I	Registered Agent:	<u>:</u>		
I hereby accept the appointment as registere provisions of all statutes relative to the propaction as regions of my position as regions of the filed to merely reflect a change in the	er and complete stered agent as registered office	perjormance of provided for in (my aures, and r on Chapter 605, F.S. O	r, if this document is

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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 ac or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
•			Change
· 			Add
			☐ Remove
			Change
			Add
			☐ Remove
			☐ Change
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			Remove
			□ Change

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ote:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie
e red The	90th day after the record is filed.
The	July 30 2019
The	
The	July 30 2019
The	July 30 2019

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Filing Fee: \$25.00