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# **COVER LETTER**

TO: Registration Sec Division of Corp	ction porations	•	
SUBJECT:	retill	nited Liability Company	·
The enclosed Articles of z	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Lisa	V. Stewart	
	Iret	Firm/Company	
	125 N	W 11 th are	
	Dania E	City/State and Zip Code	•
	Daisey. E-mail address: (	25 @ gmail to be used for tourse annual report notifi	Com-
For further information co	oncerning this matter, please co	ali:	
Kimberly	Daise	at ( <u>786)</u> <u>463</u> Area Code Daytime	2197 Telephone Number
Enclosed is a check for the	e 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:

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

ed Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_\_\_\_ Florida document number L 14 00007630 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC. Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

#### 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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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·		Dania Bd Fl 3300	24 Remove
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Mar	Gladys Daise	Jania Bch F13300	Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	<del></del>	
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E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to Note:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	605.0207 listed as	(3)(b) the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea (b) The 90th day after the record is filed.	rlier of	<b>:</b>
Dated January 19 17.  Signature of a Member or authorized representative of a member		
L'SA V. Stewart  Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00