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#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT. LING	iseu ann n	niller LLC	
SUBJECT: UT	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	undsay	Ann Miller P	bulloch
		miller Bu	
		Parks #314	
	Naga	5, L 3407 City/State and Zip Code	<del>}</del>
		design with 5 to be used for future annual report no	olash.com
For further information c	oncerning this matter, please c	all:	
unaseu	A	at (239 ) 438	-6463
Name	Person	Area Code Dayti	me 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 Addres		Street Address: Registration S	ection
Division of C	Corporations	Division of Co	orporations
P.O. Box 632 Tallahassee,		The Centre of	Tallahassee oe Street, Suite 810
rananassee,	にん フムストサ	Z4TJ IN. MIOIII	oc suect, sauc 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

112

## (Name of the Limited Liability Company as it now appears on our records.)

(A	Florida Limited Li	ability Company)			6 1 21 3 - 1 1 3 - 1 1
The Articles of Organization for this Limited Liab Florida document number		vere filed on _	5/2012	014	and assigned
This amendment is submitted to amend the following	ing:				
A. If amending name, enter the new name of the	LERBI	luoci	t UC	or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicab		4314	3800 aug es, FL 3		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>	4314	320 au 40, FL 3		
B. If amending the registered agent and/or registered office address by		•	•		
Name of New Registered Agent:	undse	y Anr	miller	Bul	loan
New Registered Office Address:	1036 3		es#3	14	
	Napu	City	, Flor	-	HO2

#### 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:

, j .

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address 2020 MAY 18 Pit 5: 19	Type of Action
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ve date, if other than the	date of filing:		(optional	)
ctive date is listed, the date mus If the date inserted in this bl	st be specific and cannot be proceed does not meet the app	licable statutory filing re		
ent's effective date on the De	epartment of State's recor	ds.		
specifies a delayed effective	e date, but not an effective	e time, at 12:01 a.m. on t	he earlier of: (b) T	he 90th day a
ed.				