## L14000085813

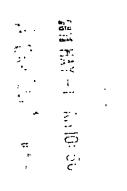
(Requestor's Name)
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## **COVER LETTER**

	tration Science of Co.	ection rporations		
SUBJECT: _	San	Marino Capital LLC		
		Name of Lin	nited Liability Company	
				7 N - 2 9 J
The enclosed A	Articles of	Amendment and fee(s) are sub	omitted for filing.	•
Please return a	ll correspo	ondence concerning this matter	to the following:	4.j
		Gordon Crawford		•
			Name of Person	
		San Marino Capital L	LC	
		·-	Firn/Company	
		113 Magnolia Ave #20	07	
			Address	
		Sanford, FI 32771		
			City/State and Zip Code	
		gordon@theprincipalrea	- ·	
For further info	ormation c	E-mail address: ( concerning this matter, please c	to be used for future annual report not	ification)
Gordon C			\ 407-383-9	วกว
		f Person	3i ( )	ne Telephone Number
Enclosed is a c	heck for th	he following amount:		
<b>♥</b> \$25.00 Fili	ng 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)
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	on rations enter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

## San Marino Capital LLC

(Name of the Limited Liab	lity Company a	s it now appo	ears on our	records.
(A Flori	da Limited Liabi	lity Company	)	

( <u>Same of the Elimited Li</u> (A F)	lorida Limited Liability Company)	ars on our records.)	a de la
The Articles of Organization for this Limited Liabili Florida document number L14000085813	ity Company were filed on	05/28/2014	and assigned
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company l	here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the	designation "LLC" or the abbr	eviation "L.L C."
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET A)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office	egistered office address o	on our records, <u>enter th</u>	
Name of New Registered Agent:			
New Registered Office Address:	Enter Flo	orida street address	
<del>-</del>	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Regis	tered 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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Donna Marricle		
		113 Magnolia Ave #207 Sanford, Fl 32771	
			Change
			🗆 Add
			□ Remove
			Change
			□ Change
			Remove
			Change
			□ Remove
			🗆 Remove
			Changa

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ective date, if other that effective date is listed, the date in a start in the date in a start in the date.	n the date of film ite must be specific an	g:d cannot be prior to dat	e of filing or more tha	(optional) 190 days after filing.) Pi	rsuant to 605,02
e: If the date inserted in tument's effective date on	inis block does not t	meet the applicable :	statutory filing requ	rements, this date wil	I not be listed:
•	-				
record specifies a de	layed effective (	date, but not an	effective time,	at 12:01 a.m. on	the earlier
he 90th day after the	e record is filed.	•			
ed April 29, 2019			1	1	
ed //piii 20, 2019		,	$\Delta I$		
			~ 111		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00