L140000099678

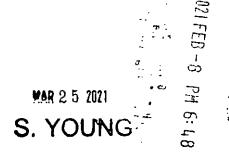
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COVER LETTER

Division of Corp	orations	•	
SUBJECT:		SUTING GROUP ted Liability Company	LLG
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter t	o the following:	
	DAYI	OB POPTWOON	DD
	DAYENF	Pirm/Company	GROUP, LLC
	112 ORA	AVE SOTT	E 20t
	DAYTONA	City/State and Zip Code	3204
		to be used for future annual report notifi	
For further information economic Name of	Person	all: 1000 (407) 325 at (407) 222 Area Code Daytime	- 0532_ - 6003 Telephone Number
Enclosed is a check for th	c following amount:		
S25.00 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)

TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

O	F 19.2
(Name of the Limited Liability Compar (A Florida Limited L	NTING GROUP LECTO CAROUT RECORDS.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L14000099678</u>	were filed on 6/23/2014 and assigned assigned and assigned and assigned assigned and assigned and assigned assigned and assigned ass
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ity Company," the designation "L.C." 112 ORANGE AVE. # 2.0+ DMIDNA BEACH, FL 32114
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	112 ORANGE AVE # 204 DAMTONA BEACH, FZ 3214
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida Zip Code

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMER	SERN ROBBET PAUME	r 112 orange ave	X Add
MOR		SUTE 204	□Remove
		DAYTONA BKACH, FL.	3211 4 □Change
MGR	DAVID R. JAZOBS	6900 8. ORANGE BLOSSOM	<u>7</u> □ Add
		OKUANDO, FL 32809	Kemove
			□ Change
			🗆 Add
			🗆 Remove
			🗆 Change
		<u> </u>	□Add
		<u></u>	Remove
			□Change
			□Add
			Remove
			□Change
			
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Filing Fee: \$25.00