

L14000105088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

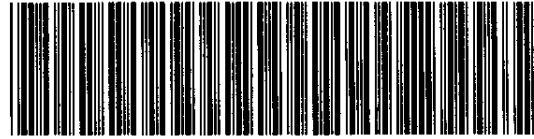
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200291451492

10/21/16--01015--021 **25.00

FILED
16 OCT 21 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 24 2016

Y SUE

GORNTO LEGAL, P.A.

ATTORNEY AT LAW

444 Seabreeze Boulevard, Suite 360

Daytona Beach, Florida 32118

EMAIL: gus@gorntolegal.com

L. A. 'Gus' Gornto, Jr.

Board Certified Tax Lawyer

Master of Laws in Taxation

Telephone (386) 257-1899

Telecopier (386) 257-1833

October 20, 2016

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Franklin D. Roosevelt, LLC

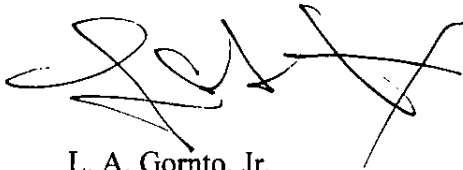
Dear Sir or Madam:

Enclosed for filing is an original Articles of Amendment to Articles of Organization for the above-referenced limited liability company.

I have enclosed a check in the amount of \$25.00 for all costs, including filing fees.

Thank you for your assistance in this matter.

With kindest regards,



L. A. Gornto, Jr.

LAG/ml

Enclosures

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Franklin D. Roosevelt, LLC

(Name of the Limited 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 July 1, 2014 and assigned Florida document number L14000105088.

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 "L.L.C."

Enter new principal offices address, if applicable:

4131 Rector Road

(Principal office address MUST BE A STREET ADDRESS)

Cocoa, FL 32926

Enter new mailing address, if applicable:

4131 Rector Road

(Mailing address MAY BE A POST OFFICE BOX)

Cocoa, FL 32926

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:

444 Seabreeze Blvd, Suite 360

Enter Florida street address

Daytona Beach

City

Florida 32118

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Joseph R. O'Lone, as Trustee		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Joseph R. O'Lone	4131 Rector Road	<input checked="" type="checkbox"/> Add
		Cocoa, FL 32926	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
 16 OCT 21 PM 14:18
 CLERK OF COURT
 PALM BEACH COUNTY
 FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

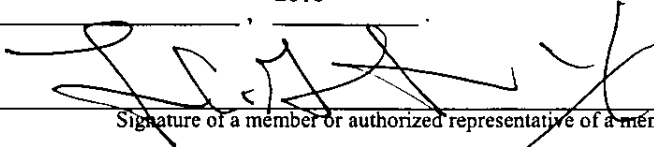
Multiple horizontal lines for amending information.

FILED
OCT 21 PM 4:14
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)
(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 605.0207 (3)(b)
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.

Dated October 20, 2016



Signature of a member or authorized representative of a member

L. A. Gornito, Jr. - Authorized Representative

Typed or printed name of signee