# L14000129059

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	<u> </u>
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	•
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	



200281629542

02/04/16--01021--005 \*\*30.00

2016 FEB -4 PH 2: 26

Office Use Only

FEB OF THE PRICE

## ${\color{red} \mathbf{COVER}} \underset{\scriptscriptstyle p}{\mathbf{LETTER}}$

Division of Co	rporations		
SUBJECT:	Johanse	n LLC	
SOBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
		Lili Johansen	
		Name of Person	
		Johansen LLC	
		Firm/Company	
		1935 8th St S	
		Address	
		Naples FL 34102	
		City/State and Zip Code	
	E mail address (	LIJ@ao.dk to be used for future annual re	
			sport notification)
For further information of	concerning this matter, please ca	all:	
Lili Joh		at ()	239 - 293 - 4482
Name o	of Person	Area Code	Daytime Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certificate of Status &

#### **MAILING ADDRESS:**

TO:

**Registration Section** 

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

Johansen LLC ( <u>Name of the Limited Liability Company</u> (A Florida Limited Liab		ecords.)
The Articles of Organization for this Limited Liability Company we Florida document numberL14000129059	ere filed on08/	/18/2014 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y 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:	1935 8th Stre	etS = ==================================
(Principal office address MUST BE A STREET ADDRESS)	Naples FL 34	
Enter new mailing address, if applicable:	1935 8th Stre	et S 2: 2
(Mailing address MAY BE A POST OFFICE BOX)	Naples FL 34	102
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:  Name of New Registered Agent:	e address on our rec	cords, <u>enter the name of the ne</u>
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street a	address
		. Florida
	City	Zip Code

If Changing Registered Agent, Signature of New 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 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 =	<b>Authorized</b>	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			Add
			□ Remove
			Change
			Add
			□ Remove
			A Change
			And Change
			☐ Remove
		_	Change
			☐ Remove
			☐ Change

*	•	
*···		
<u></u>		<del></del>
<del></del>		<u>.</u>
<del></del>		<del></del>
<del></del>		
<del></del>		
<del></del>		
<u></u>		
<del></del>		<del> </del>
f an effective date is lis Note: If the date ins	ther than the date of filing:	after filing.) Pursuant to 605.0207
e record specific The 90th day a	es a delayed effective date, but not an effective time, at 12:0 after the record is filed.	1 a.m. on the earlier of
Pated	January 28, 2016	74. 28 B
	Lili Johansen Signature of a member of authorized representative of a member	
<del></del>	Signature of a member of authorized representative of a member	O T T TELEVISION
	Lili Johansen	

Page 3 of 3

Filing Fee: \$25.00