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(Document Number)	
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FILED 2016 APR 18 P 1: 05 SECRETARY OF SIME TALLAHASSEE, FLORIDA

BRUCE

8 1	COVER LETTER
	ration Section ,
Divisio	on of Corporations
SUBJECT: 13	328 Parker Street, LLC
	Name of Limited Liability Company
The enclosed A	rticles of Amendment and fee(s) are submitted for filing,
Please return all	correspondence concerning this matter to the following:
:	Jill E. Burton
4 • •	Name of Person
	Firm/Company
	800 Pershing Avenue
:	Address
	Orlando, Florida 32806
:	City/State and Zip Code
	jillbeth11@aol.com E-mail address: (to be used for future annual report notification)
For further info	rmation concerning this matter, please call:
Jill E. Burton	407 257-2570 A C
·	Name of Person Area Code Davtime Telephone Number (2)
:	
Enclosed is a cl	heck for the following amount:
■ \$25.00 Filin	ng Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
	MAILING ADDRESS:STREET/COURIER ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301Clifton Building
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• AR	TICLES OF	AMENDMENT	
۲ G A		O ORGANIZATION	:
	OF C		;
	0	T,	:
1328 Parker Street, LLC			
(Name of the Lim	ited Liability Compa	ny as it now appears on our records.) Jability Company)	
	(A FIORIda Limited I	lability Company)	;
The Articles of Organization for this Limited I	Liability Company	were filed on and a	ssigned
lorida document number L14000149586			ì
	1		
This amendment is submitted to amend the fol	lowing:		
. If amending name, <u>enter the new name</u>	of the limited liab	ility company here:	
			:
he new name must be distinguishable and contain the	words "Limited Liabi	ity Company," the designation "LLC" or the abbreviation "	L.L.C."
nton non-numerical offices address if anni	aahla.	800 Pershing Avenue	;
Inter new principal offices address, if appli		Orlando, Florida 32806	
<u>Principal office address MUST BE A STRE.</u>	<u>ET ADDRESS)</u>		
• •			:
		800 Pershing Avenue	
nter new mailing address, if applicable:	ter new mailing address, if applicable: ailing address MAY BE A POST OFFICE BOX)		:
Mailing address MAY BE A POST OFFICE			;
			:
3. If amending the registered agent and	Vor registered of	fice address on our records, enter the name	e of the
egistered agent and/or the new registered of	once address her	20.0	:
	Jill E. Burton	LLAH.	1
Name of New Registered Agent:	JIII E. Burton		
New Registered Office Address:	800 Pershing A	venue	TT I
-		Enter Florida street address	0
	Orlando	, Florida 32806	• • • • • • • • • • • • • • • • • • •
		City City	e

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, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member Title <u>Name</u> **Address** Type of Action Matthew Reynolds PA MGR 9660 Sweetleaf Street 🛛 Add Orlando, Fl 32827 Remove Change MGR Jill E. Burton Jill E. Burton 🖬 Add 800 Pershing Avenue Remove Orlando, Fl 32806 □ Change Add: □ Remove Change 🗆 Add Remove 22 00 SEE. F ∞ DAdd LORID ---Remove Change 🗖 Add 🞡 C Remove Change

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Effective date, (If an effective date	f other than the date o s listed, the date must be spec	f filing:		filing or more that	(option	al)	uant to 605.	.0207 (3)
(If an effective date <u>Note:</u> If the date document's effect	s listed, the date must be spec inserted in this block doe tive date on the Departme	f filing: ific and cannot b is not meet the int of State's re	e prior to date of applicable statu cords.	tory filing requ	(option n 90 days after fi irements, this c	a l) ling.) Pursu late will n	ot be liste	d as the
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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