L14000150525

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COVER LETTER

то:	Registration Se Division of Cor						
SUBJE	SPA FOGO	HARE, LLC					
SOLJE	CI	Name of Lim	ited Liability Company				
The enc	losed Anicles of	Amendment and fee(s) are sub	mitted for filing.				
Please r	eturn all correspo	ndence concerning this matter	to the following:				
		DAVID BROWDER JR.,	ESQ.				
Name of Person							
LAW OFFICE OF DAVID BROWDER JR.							
Firm/Company							
		305 SOUTH DUNCAN A	VENUE				
			Address	············			
		CLEARWATER, FL 3375	35				
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·			
		browderlaw@aol.com					
		E-mail address: (to be used for future annual report notifi	ication)			
For furt	her information co	oncerning this matter, please ca	all:				
DAVID BROWDER JR., ESQ.			727 461-5788				
	Name of	`Person	at () Area Code Daytime	Telephone Number			
Enclose	d is a check for th	e following amount:					
\$25	.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)			

MAILING ADDRESS:

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

SPA FOGGIARE, LLC		
(Name of the Limited Liability (A Florida Li	Company as it now appears on our mited Liability Company)	records.)
The Articles of Organization for this Limited Liability Con Florida document number L14000150525	npany were filed on $\frac{09/25/201}{}$	4 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
FOGGIARE, LLC		
The new name must be distinguishable and contain the words "Limitec	d Liability Company," the designation	on "LLC" or the abbreviation "L,L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u>SSS)</u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:		records, enter the name of the ne
THE REGISTER CHILD I HAVE SELVED.	Enter Florida stree	et address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered A		
I hereby accept the appointment as registered agent an provisions of all statutes relative to the proper and comaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	nplete performance of my du nt as provided for in Chapte	ties, and I am familiar with and ; r 605, F.S. Or, if this document is

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
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LAW OFFICE OF DAVID BROWDER, JR.

305 South Duncan Avenue Clearwater, FL 33755 Phone: (727) 461-5788 E-Mail: browderlaw@aol.com

October 21, 2016

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

RE: Amendment of Articles Spa Foggaire, LLC

Gentlemen,

Enclosed is a Cover Letter, Articles of Amendment, and my check in the amount of \$30.00 for the filing fee and Certificate of Status.

The only change is to the name, to delete the word "Spa".

Please call if you have any questions. Thank you for your assistance in this matter.

Very truly,

David Browder Jr.

Db Encl

CC client