L14000155141

(Re	equestor's Name)	
(Ac	ddress)	· · · · · · · · · · · · · · · · · · ·
(Ad	ddress)	
(Ci	ty/State/Zip/Phone #/)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name))
(De	ocument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	

Office Use Only



100289540961

08/29/16--01037--004 **100.00

S Warren AUG 3 0 2016

COVER LETTER

	istration Sec ision of Corp		*	• ,		
	THINGS I M	IUST EARN LLC				
SUBJECT:		Name of Limi	ited Liability Company			
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	idence concerning this matter	to the following:			
		RICHARD P ZARETSKY				
			Name of Person			
		ZARETSKY LAW GROU	Р			
		Firm/Company				
		1615 FORUM PLACE #3A	A			
			Address	and the second s		
		WEST PALM BEACH, FL	33401			
			City/State and Zip Code	-		
		RPZ@ZARETSKYLAW.C				
		E-mail address: (1	to be used for future annual report no	utification)		
For further in	nformation co	ncerning this matter, please ca	ıll;			
RICHARD 2	ZARETSKY		561 6896660 at ()			
-	Name of	Person		me Telephone Number		
Enclosed is a	a check for the	e following amount:				
☑ \$25.00 F	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

(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our r ed Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>L14000155141</u> .	ny were filed on $\frac{10/3/2014}{}$		and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation	"LLC" or the abb	
Enter new principal offices address, if applicable:			22) 22)
(Principal office address MUST BE A STREET ADDRESS)		27	**************************************
		SST.	(V) franco
		. T. S	> m
Enter new mailing address, if applicable:		95 <u>7</u>	_ =
(Mailing address MAY BE A POST OFFICE BOX)		—— <u>Б</u> ल	w
			···
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		cords, <u>enter t</u>	he name of the
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street o	uddress	
	City	_, Florida	Zip Code
	City		ыр Соне

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
AMBR	ERIKA GONZALEZ	120 LANCASTER WAY	□ Add
		ROYAL PALM BEACH, FL 33414	■ Remove
			Change
MGR	ERIKA GONZALEZ	120 LANCASTER WAY	Add
		ROYAL PALM BEACH, FL 33414	■ Remove
			Change
MGR	MOISES GONZALEZ	120 LANCASTER WAY	■ Add
		ROYAL PALM BEACH, FL 33414	□ Remove
			Change
MBR	ERIKA GONZALEZ		≌ Add
			□ Remove
			Change
			Add
			Remove
		SECRETARY SELLABASSI	□ Change
		#*PE	P C Remove
		RIDA	Change

			· · · · · · · · · · · · · · · · · · ·				
					•		
ective date, if other than the date of filin	ng: <u>8/22/2016</u>			(optio	nal)		
effective date is listed, the date must be specific and ee: If the date inserted in this block does not i	d cannot be prior to meet the applica	to date of filing a able statutory f	or more than 90 filing require:	0 days after: ments, this	filing.) I date w	Pursuant vill not b	to 605.0 se listed
ument's effective date on the Department of	State's records.						
			+: +	12.01 -		- +b	an eli au
record specifies a delayed effective on the specifies and specifies and specifies.		t an enectiv	re unie, ac	12.01 a	.111. 01	ii tile t	earner
ed AUGUST 22	, 2016				45.5	9 23 33	
906 a	/			9 mg 6 para matan 10	272	e S	1 [
	member or autho	orized representa	ative of a mem	ber 17	125%	2	-

Page 3 of 3

Filing Fee: \$25.00