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K. SPLY EXAMINER JUL 19

# COVER LETTER.

• • •
TO: Registration Section Division of Corporations
SUBJECT:
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kenneth Pechannon, Esq.
Kenneth Bohanco, PL Firm/Company
221 N. Cauxway, St. A
Wew Smyrna Brach M 32169 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Area Code Daytime Telephone Number
Enclosed is a check for the following amount.
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \cent{Certified Copy} \\ (additional copy is enclosed) \$\Bigcup \cent{Certified Copy} \\ (additional copy is en

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

2015 JUL 18 PM 1:45 ed 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 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 "L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Enter Florida street address Florida City

#### 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 or removed	Authorized Person(s) authorized to m from our records:	anage, <u>enter the titl</u>	e, name, and address of each person being added	
MGR = Manager AMBR = Authorized Member		2016 JUL 18 5		
Title	<u>Name</u>	<u>Address</u>	20/6 JUL 18 PM / Type of Action	
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etive date, if other than the date of filing:  etive date is listed, the date must be specific and cannot be prior to date of filing of the date inserted in this block does not meet the applicable statutory firm's effective date on the Department of State's records.	more than 90 days	optional) s after filing.) Purso s, this date will n	uant to 605,0; not be listed
ord specifies a delayed effective date, but not an effectiv 90th day after the record is filed.	e time, at 12:0	01 a.m. on th	ne earlier
June 27 2016	>		
The first	<u>~</u>		
Signature of a member of authorized representat	ive of-a-member	<u> </u>	

Page 3 of 3

Filing Fee: \$25.00