# 114000162279

(Re	equestor's Name)	<u> </u>
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·
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#### **COVER LETTER**

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GHP	JECT:		VER JV LLC		
SUB	JECI		Name of Limi	ited Liability Company	
The e	enclosed	d Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Pleas	se returr	all correspo	ndence concerning this matter	to the following:	
			CARRIE CHRISTINO		
				Name of Person	
			SOHO CAPITAL LLC		
				Firm/Company	
	701 S HOWARD AVE STE 106-322				
				Address	
			TAMPA, FL 33606		
				City/State and Zip Code	
			CARRIE@SOHO-CAPITA		
			E-mail address: (	to be used for future annual report notific	ation)
For f	urther in	nformation co	oncerning this matter, please ca	all;	
CHA	ARLES	BRUCK		813 335-9210 at ( )	
		Name o	f Person		Telephone Number
Encl	osed is	a check for th	ne following amount:		
<b>=</b> \$	\$25.00 I	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

DAYFLOWER JV LLC		<u> </u>
( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compartion document number <u>L14000162279</u>	ny were filed on 10-17-14	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<b>=</b> 0 ≥ ∞
(Principal office address MUST BE A STREET ADDRESS)		NEC SEC
		1 95 7
Enter new mailing address, if applicable:		Y OF STA
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	· · · · · · · · · · · · · · · · · · ·	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	7in Code

#### 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
MGR	CHARLES BRUCK	701 S HOWARD AVE	
		STE 106-322	■ Remove
		TAMPA, FL 33606	Change
MGR	ADAM HARDEN	701 S HOWARD AVE	Add
		STE 106-322	<b>⊞</b> Remove
		TAMPA, FL 33606	Change
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			☐ Change
			□ Remove
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	5/2/18			
ffective date, if other than the an effective date is listed, the date motore: If the date inserted in this locument's effective date on the line in t	ust be specific and cannot be pro- block does not meet the app	ior to date of filing or licable statutory fil	(option more than 90 days after filing requirements, this d	al) ing.) Pursuant to 605.02 ate will not be listed a
e record specifies a delaye The 90th day after the re	ed effective date, but r cord is filed.	not an effective	time, at 12:01 a.n	n. on the earlier (
ated MAY 3	2018		· . O	
		-G/Pr		
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	Signature of a member or au	thorized representative	e of a member	

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Filing Fee: \$25.00