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SECRETARY OF SHATE

K.SALY EXAMINER FEB 16

## **COVER LETTER**

TO: Registration Secti Division of Corpo			
SUBJECT:C	herry Consul Name of Limi	fing LLC ited Liability Company	<del></del>
The enclosed Articles of An	nendment and fee(s) are subr	nitted for filing.	
Please return all correspond	ence concerning this matter t	to the following:	
	Amyah	Parrish Name of Person	
	•	Consulting, LLC	
		d Daytona Road	
	Port Oran	ge, FL 32/28  City/State and Zip Code  This k cherry coop be used for future annual report notific	
	aparrish	D think cherry - c	on
			cation)
For further information con-	cerning this matter, please ca	all:	
Amyah Pa Name of Pa	erson	at (386) 589-3 Area Code Daytime	3 5 8 5 Telephone Number
Enclosed is a check for the	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	$\mathcal{C}_{H_{\infty}}$
ARTICLES OF O	RGANIZATION 2012
Ol	F " OFER I
(Name of the Limited Liability Compan (A Florida Limited Li	RGANIZATION  F  Ling, LLC  ALTAHABUTOR  TO BE SEED TO B
(A Florida Limited L	iability Company)
The Articles of Organization for this Limited Liability Company virial document number 414000/66/67	were filed on $10/34/14$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1973 Old Daytone Road Port Orange, FL 32128
(Principal office address MUST BE A STREET ADDRESS)	Port Orange, FL 32128
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	sane as above
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	•
Name of New Registered Agent: Am	yah. P. Parrish  3 Old Daytone Rd.  Enter Florida street address
New Registered Office Address: 197	3 Old Day tone Rd.  Enter Florida street address
<i>n</i> /	0

## 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

	g Authorized Person(s) authorized to n from our records:	nanage, enter the title, name, and address of each person be	eing added
MGR = M AMBR = A	lanager Authorized Member		
<u>Title</u>	Name	Address Type of A	Action
MGR	Donald R. Parrish	1187 SE 65th Circle Dealy, Fl 34477 Add	
			ove
	۸	Chan	ige
MGR	Troy T. Parrish	1112 Broadway St. Mt. Vernon, Il 62864 Add	
		Remo	o <b>ve</b>
		Chan	ıge
MGR	Anyah P. Parrish	1973 Old Daytone Road Part Orange, FL 32128	
		Port Orange, 1 C 321000	)ve
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lote: If the d	e, if other than to the is listed, the date is ate inserted in this fective date on the	s block does not r	neet the applica				
	pecifies a delay day after the r			an effective t	ime, at 12:0:	l a.m. on the o	earlier o
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Page 3 of 3

Filing Fee: \$25.00