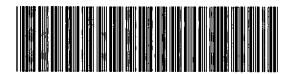
## 1990160991

(Re	equestor's Name)	
(Ad	dress)	· ·
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

TO:		istration Secti ision of Corpo				
CI IR I	ECT:	Team Ram, L	L.C.			
SUBJ	ECI;	***************************************	Name of Limi	ited Liability Company		
The en	nclosec	Articles of A	nendment and fee(s) are subr	mitted for filing.		
Please	e return	all correspond	lence concerning this matter t	to the following:		
			Matthew G. Sherman			
				Name of Person	· <del></del>	-
			Team Ram, L.L.C.			
				Firm/Company		-
			864 Whippoorwill Row			
				Address		-
			West Palm Beach, Florida	33411		
			· · · · · ·	City/State and Zip Code		-
			mattsherman@bellsouth.net			
			E-mail address: (t	o be used for future annual re	port notification)	
For fu	irther in	nformation con	cerning this matter, please ca	ill:		
Matth	iew G.	Sherman		561 793- at ()	9174	
		Name of P	erson	Area Code	Daytime Telephone Numbe	г
Enclo	sed is a	check for the	following amount:			
<b>=</b> \$2	25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certifica sed) Certified	ate of Status &

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

Team Ram, L.L.C.	
(Name of the Limited Liability Compa (A Florida Limited l	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L14000167991	were filed on 10/28/2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	vility company here:
Team Sam, L.L.C.	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	864 Whippoorwill Row
(Principal office address MUST BE A STREET ADDRESS)	West Palm Beach, Florida 33411
Enter new mailing address, if applicable:	864 Whippoorwill Row
(Mailing address MAY BE A POST OFFICE BOX)	West Palm Beach, Florida 33411
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent and agreprovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as period to merely reflect a change in the registered office	ree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of NE 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	Evan S. Miller	4 Harvard Circle, Suite 100	
		West Palm Beach, Florida 33409	□ Remove
			☐ Change
			□ Remove
			☐ Change
			☐ Remove
		N	☐ Change
			□ Add
			□ Remove
			Change
			Remove  Change  Add  FES
			Add Change

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····		<u> </u>
·		
fective date, if other than the date of	of filing:	(optional)
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