## 14000169790

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	· · ·
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800282762878

03/01/16--01010--011 \*\*25.00



MAR 0 3 2016 Y SULKER

## COVER LETTER

GENI'ESEA LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: MERCEDEZ G. ROBINSON Name of Person GENI'ESEA LLC Firm/Company 34^5 NW 11 CT Address MIAMI, FL 33127 City/State and Zip Code MERCEDEZ1289@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MERCEDEZ G. ROBINSON 492-2521 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, \$25.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

**MAILING ADDRESS:** 

TO:

Registration Section
Division of Corporations

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

GEN'IESA LLC		
( <u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records. Limited Liability Company)	)
The Articles of Organization for this Limited Liability Co	mpany were filed on 10/31/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
GENI'ESEA LLC		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		-
(Principal office address MUST BE A STREET ADDRI	ESS)	_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		16 MAR - PH
B. If amending the registered agent and/or registered agent and/or thε ew registered office address.	ered office address on our records, ess here:	enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	rida
-	City	Zip 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 = M $AMBR = A$	lanager uthorized Member	-, <del>-</del>	
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			□ Change
			□ Remove
			Change
			□ Add
			Re <b>mo</b> ve
			Change
			— □ Aत्ती! '
			Refnove
			Change
		<del></del>	Add
			Remove
			☐ Change
<u>.</u>			
			□ Remove
			Change

·	
	<b>6</b>
	50 - <del> -</del>
	<u> </u>
	<u>№</u>

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee