L1400017894L

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT .	MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
(50	odinone (tamber)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		•
i		
.		

─ Office Use Only



400267473174

01/08/15-;01017--001 **25.00

SECRETARY OF STATE
ALLAHASSEF, FLORIDA

J. Shivers JAN 20 agus

COVER LETTER

*

Division of Co	rporations		
SUBJECT:	14871	Land LLC.	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
		Weston V. Ehrman	
		Name of Person	
		Firm/Company	
		14831 SW 256 Street	
		Address	
	Ho	mestead, Florida 33032	
		City/State and Zip Code axxmotors22@aol.com	
For further information of	E-mail address: (concerning this matter, please co	to be used for future annual report notifi all:	cation)
Troy Ehrman		305 5824412	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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:

TO:

Registration Section

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

14871 La (Name of the Limited Liability Compa (A Florida Limited I		
The Articles of Organization for this Limited Liability Company Florida document number L14000178946	were filed on 11/18/14	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	14831 SW 256 street	
(Principal office address MUST BE A STREET ADDRESS)	Homestead, Florida 33032	
Enter new mailing address, if applicable:	14831 SW 256 Street	
(Mailing address MAY BE A POST OFFICE BOX)	Homestead, Florida 33032	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, <u>ente</u> e:	15 SEC
Name of New Registered Agent:		28 A
New Registered Office Address:		S 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Enter Florida street address	55 89 53

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Weston V. Ehrman	14831 SW 256 Street	_ Add
		Homestead, Florida 33032	Remove
mgr	Gex F. Richardson	1009 Cordova Road	
	·	Fort Lauderdale, Florida 33316	Remove
			Add
			□ Remove
			□ Add
			Remove
			JAN - Add AH SSEC S OR AND
			□ Add
			□ Remove

	•
iffective date, if other than the effective date must be specific the date this document is filed by	in the date of filing: (optional) ic, cannot be prior to date of receipt or filed date and cannot be more than 90 days after by the Florida Department of State)
_{lated} January 6,	(, 2014) . //
Dated	
Jated	Signature of agreember of authorized representative of a member
Jated	Signature of amember of authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE