## LYCOUSTOUG

(Re	equestor's Name)	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 0 7 2016 S. YOUNG

## COVER LETTER

TO: Registration S Division of Co				•
PIPISTRI SUBJECT:	ELO LLC			
	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	C/O ANDRE REUTER			
		Name of Person		
		Firm/Company		TACE OF
9500W BAY HARBOR D		DR. #7A		A HULL
	Address BAY HARBORISLANDS, FL 33154			SEE T
		City/State and Zip Code		tus &
	REUTERANDRE@ME.C	to be used for future annual report notific	cation)	
For further information of	concerning this matter, please c	all:		
ANDRE REUTER		917 532-3875 at ()		
Name o	f Person		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)	
	ING ADDRESS: ration Section	STREET/COURIE Registration Section	R ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PIPISTRELO, LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Comp.  Florida document numberL14000189049	any were filed on 12/05/2014	and assigned
This amendment is submitted to amend the following:	•	<del></del>
A. If amending name, enter the new name of the limited l	liability company here:	16 JUH
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the	abbreviation "L.L.G"
Enter new principal offices address, if applicable:	C/O ANDRE REUTER	3
(Principal office address MUST BE A STREET ADDRESS	9500W BAY HARBOR DR #7A	<del>-</del>
	BAY HARBORISLANDS - FL 331	54 9 9
Enter new mailing address, if applicable:	C/O ANDRE REUTER	·
(Mailing address MAY BE A POST OFFICE BOX)	9500W BAY HARBOR DR #7A	
	BAY HARBORISLANDS, FL 3315	,4
B. If amending the registered agent and/or registered registered agent and/or the new registered office address by the Norman of New Registered Agents.		er the name of the new
Name of New Registered Agent: N/A		
New Registered Office Address:	Enter Florida street address	
	, Florida _	Zip Code
New Desirement Leave to Change and Call and Desirement	Cuy	rsp 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>	Name	Address	Type of Action
N/A	N/A	N/A	
		N/A	□ Remove
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			Add TASEC
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REPRESENTATIVE OF A MEM	BER: THE NAME SHOULD BE ÖVIVIANA LEISER- AND NOT VIVIANA	
LAISER	· · · · · · · · · · · · · · · · · · ·	
THE CORRECTNAME OF THE	MEMBER OR AN AUTHORIZED REPRESENTATIVEOF A MEMBER IS	
AND SHALL BE VIVIANA LEIS	SER	
	· · · · · · · · · · · · · · · · · · ·	
		<b>デ</b> 三足
		Z -6
		AM II:
		1:07
ive date, if other than the date elective date is listed, the date must be sported in this block do ent's effective date on the Department.	ecific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605, ses not meet the applicable statutory filing requirements, this date will not be listed	020 <b>7</b> d as
ord specifies a delayed effer 90th day after the record is	ctive date, but not an effective time, at 12:01 a.m. on the earlie filed.	r of
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Filing Fee: \$25.00