# 114000193577

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Bocument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



000291450180

10/24/16--01016--020 \*\*25.00

OCT 25 2016 S. YOUNG 16 OCT 24 PH 4: 04

SECRETARY OF STATE.
TALLAHASSEE: FLORIDA

## **COVER LETTER**

TO: Registration S Division of Co		•		
Graffiti Ju	nktion 14, LLC			
SUBJECT:	Name of Lim	ted Liability Company	·	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		•
	Kellette Robinson		- <u></u>	图
		Name of Person	5 O	CRE CRE
	Graffiti Junktion 14, LLC		16 OCT 24 PM 4. 0	安安市 公型[
	-	Firm/Company		, जिल्ल
	700 E. Washington St., Up	estairs Unit		
		Address		2 9
	Orlando, Florida 32801			
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
	kelli@graffitijunktion.com			
For further information	E-mail address: (t concerning this matter, please ca	o be used for future annual report notif ll:	ication)	
Kelli Robinson		407 245-7878		
Name	of Person	Area Code Daytime	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 ARTICLES OF ORGANIZATION OF

Graffiti Junktion 14, LLC				
(Name of the Limi	ted Liability Comps (A Florida Limited	any as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited L Florida document number L14000193577	iability Company	were filed on $\frac{12/1}{}$	9/2014	_ and assigned
This amendment is submitted to amend the foll  A. If amending name, enter the new name of	· ·	oility company her	<u>e</u> :	SECRETA TALLAHA
The new name must be distinguishable and contain the Enter new principal offices address, if applie (Principal office address MUST BE A STREE	cable:	ility Company," the des	signation "LLC" or the abbre	N 10 70 75
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	700 E. Washingto	on St. Upstairs Unit	
B. If amending the registered agent and registered agent and/or the new registered of			our records, <u>enter th</u>	e name of the ne
Name of New Registered Agent:				
New Registered Office Address:	700 E Washing	gton St. Upstairs Un	it	
		Enter Florid	lu street address	
	Orlando		, Florida <sup>32801</sup>	I
		City	, 1 101 108	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 $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			🗆 Remove
			Change
			ALL AIR
			- Proving move of the control of the
			Prange Corrida
			Remove
			☐ Change
			Add
		,	□ Remove
			Change
			□ Add
			□ Remove
			Change
			Remove
			Change

1	<u> </u>			
	-			
<u></u>			,	24
				PH 4: 04
				मृ
				<del></del>
·	<del></del>			
	<u> </u>			
ctive date, if other than the effective date is listed, the date must	date of filing:	to date of filing or n	(opti	onal)
e: If the date inserted in this blo	ck does not meet the applic	able statutory filir	ng requirements, thi	s date will not be listed
iment's effective date on the De	partment of State's records.	•		
ecord specifies a delayed	effective date, but no	ot an effective	time, at 12:01 :	a.m. on the earlier
ne 90th day after the reco			,	
October 19th	2016			
October 19th				
16 - 10 + 1	Tuhun W Signature of a member or auth			
3 4 1 1 1 1 1 1 1 1	1 till x x(1 x/ x/ 1/ x/ 1/ x/ 1/ x/ 1/ x/ 1/ x/ 1/ x/ x/ 1/ x/			

Page 3 of 3

Filing Fee: \$25.00