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## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: STIVES LLC  Name of Limited Liability Company						
Name of Entared Elaurity Company						
The enclosed Articles of Amendment and fce(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
SANO2A KARTIS  Name of Person						
SJK Vientures LC Firm/Company						
868 Oslphin Diener, Nu						
City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:						
Sandra Kachis at (941) 302 - 2337  Name of Person Area Code Daytime Telephone Number						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee Certificate of Status    \$30.00 Filing Fee & Certified Copy (additional copy is enclosed)   \$60.00 Filing Fee, 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

(Name of the Limited	Liability Company	as it now appears on ou	ir records.)	·	
(A	Florida Limited Lia	as it now appears on ou bility Company)	<u></u>		
The Articles of Organization for this Limited Liab	oility Company w	ere filed on <u>\\\\</u>	2105/2	and assigned	
Florida document number <u>L\50000</u>	10194	·	•		
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of t	he limited liahili	ty company here:			
The state of the s	ac matted month	ty company nere.			
The new name must be distinguishable and contain the wor	ds "Limited Liability	Company," the designat	ion "LLC" or the ab	obreviation *L.L.C."	
Enter new principal offices address, if applicab	ole:				
(Principal office address MUST BE A STREET	ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE Be	<u> </u>				16
				200	AUG
B. If amending the registered agent and/or registered agent and/or the new registered officers.		ce address on our	records, enter	the name of the n	ewi Co
registered agent and/or the new registered one	e address nere.			in E	
Name of New Registered Agent:	Sand	itan X an	S	55.	
New Registered Office Address:	848	Solohia Enter Florida sin	WELDER !		<b>10</b>
	60-7 G	constable	, Florida	33948 Zip Code	
New Registered Agent's Stonature, if changing Re	aistered Agent	Cup		Lip Code	

New Neurale to Adeir Sagnature in changing Neurale to Adeir.

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

Page 1 of 3

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 <u>Address</u> Type of Action Charles Osborne MGR 3217 N. Chamberland Blud X Add 34286 - Remove \_□ Change \_D Add □ Remove \_ Change \_O Add \_□ Remove... ☐ Change 💆 Add 🤯 □ Remove □ Change ☐ Remove \_ □ Add .□ Remove

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	No. of Section 2
	01810).
	7,
	**************************************
C. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days a Note:  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	after filing.) Pursuant to 605,0207 (3)(b)
the record specifies a delayed effective date, but not an effective time, at 12:0 b). The 90th day after the record is filed.	1 a.m. on the earlier of:
Dated 8-1-2016	
Signature of a member of authorized representative of a member	
Sand Ca Landis Typed or printed name of signee	
Typed or printed name of signee	<del> </del>

Page 3 of 3

Filing Fee: \$25.00