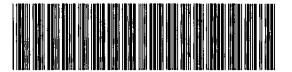
## U50006A6

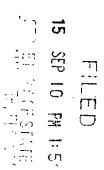
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

Div	ision of Corp	orations				
CUDIECT.	ASTRUP IN	IVESTMENTS, LLC				
SUBJECT:		Name of Limi	ted Liability Company			
The enclosed	L Articles of A	Amendment and fee(s) are subr	nitted for filing			
		ndence concerning this matter				
ricase return	an correspon	idence concerning this matter	to the following.			
		TROY H. MYERS, JR.				
			Name of Person			
		ICARD, MERRILL, CULI	LIS, TIMM, FUREN AND GINSBUR	RG, PA		
			Firm/Company			
		2033 MAIN ST STE 600				
			Address			
		SARASOTA, FL 34237				
			City/State and Zip Code		ाल् ज	
		TMYERS@ICARDMERRI				
		E-mail address: (	to be used for future annual report notifica	ation)	7 P	
For further in	nformation co	oncerning this matter, please ca	all:		13 T	FILED
TROY H. M	IYERS, JR.		941 953-8110 at ( )		2	J
	Name of	Person	Area Code Daytime T	elephone Number	- 17 S	
Enclosed is a	a check for th	e following amount:				
\$25.00 F	filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

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

ASTRUP INVESTMENTS, LLC			
(Name of the Limited Li (A F)	ability Compai orida Limited L	ny as it now appears on our r iability Company)	ecords.)
The Articles of Organization for this Limited Liabili Florida document number L15000016726	ty Company	were filed on JANUARY	28, 2015 and assigned
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liabi	ility company here:	
The new name must be distinguishable and contain the words	"Limited Liabil	ity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	16 S ORANGE AVE	
(Principal office address MUST BE A STREET A)		SARASOTA, FL 34236	
			ं ज
Enter new mailing address, if applicable:		16 S ORANGE AVE	SEP -
(Mailing address MAY BE A POST OFFICE BOX	o	SARASOTA, FL 34236	
,	<u></u>		
B. If amending the registered agent and/or r	egistered of	Tice address on our re	cords, enter the name of the ne
registered agent and/or the new registered office	address here	<u>e</u> :	
Name of New Registered Agent:	TEPHEN PIL	EGGI	
New Registered Office Address:	6 S ORANGE	AVE	
		Enter Florida street (	uddress
S	ARASOTA		_, Florida
_		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.

Changing Routered 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	TROY H. MYERS, JR.	2033 MAIN ST STE 600	Add
		SARASOTA, FL 34237	Remove
			☐ Change
MGR	GREGORY ORQUERA	16 S ORANGE AVE	Add
		SARASOTA, FL 34236	☐ Remove
			☐ Change
	<del></del>		☐ Remove
			☐ Change
			□ Add
			☐ Remove
			Change
<u></u>			□ Add [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [
			Change
<del></del>			☐ Add
			☐ Remove
			☐ Change

<u> </u>	
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	(tal)
(If an effective date is listed, the date must be specific and cannot be prior to date on Note: If the date inserted in this block does not meet the applicable standocument's effective date on the Department of State's records.	of filing or more than 90 days after filing.) Pursuant to 605.020 tutory filing requirements, this date will not be listed as
	· · · · · · · · · · · · · · · · · · ·
the record specifies a delayed effective date, but not an effective date date, but not an effective date date, but not determined an effective date date date date date, but not determined an effective date date date date date date date dat	ffective time, at 12:01 a.m. on the earlier o
b) The 90th day after the record is filed.	
Dated 09/08 / 2015.	1 5 m
Mh h	2,12 ∪
///ku/	 * * * * * * * * * * * * * * * * *

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00