L15000017691

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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
	y/State/Zip/Phone #)	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

9200 49TH STREET	Γ. LLC		
	,		
			
	<u> </u>		
· · · -			Art of Inc. File
		-	LTD Partnership File
] -	Foreign Corp. File
		-	L.C. File
)	Fictitious Name File
		-	Trade/Service Mark
] -	Merger File
		} -	Art, of Amend, File
		-	RA Resignation
		_	Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
		_	Photo Copy
		_	Certificate of Good Standing
			Certificate of Status
		_	Certificate of Fictitious Name
		-	Corp Record Search
		_	Officer Search
		-	Fictitious Search
Signature			Fictitious Owner Search
<i>.</i>		_	Vehicle Search
			Driving Record
Requested by: BA	7/12/18	-	UCC 1 or 3 File
Name		ime -	UCC 11 Search
Manne	Date 1	-	UCC 11 Retrieval
Walk-In	· -	 -	Courier

COVER LETTER

TO:	Registration Se Division of Cor			
eno re		h Street, LLC		
SUBJE	.C.I:	Name of Lim	uited Liability Company	
		Amendment and fee(s) are sub		
		George G. Pappas		
			Name of Person	
		Pappas Law & Title		
			Firm/Company	
		1822 N. Belcher Rd., Su	uite 200	
			Address	
		Clearwater, FL 33765		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	cation)
For furt	her information c	oncerning this matter, please c	all:	
George	G. Pappas		727 447-4999	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne following amount:		
₽ \$2 5	.00 Filing Fee	☐ \$30.00 Filing Pee & 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)
			compostication in	an annurce.

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

9200 49th Street, LLC	<u></u>				
(Name of the Limit	ed Liability Company as it no (A Florida Limited Liability Co	w appears on our records.)			
				and assig	med
The Articles of Organization for this Limited Li	ability Company were me	d 011		unu uoo.e	, <u>.</u>
Florida document numberL15000017691	<u> </u>				
This amendment is submitted to amend the follow	owing:				
A. If amending name, enter the new name of	the limited liability com	pany here:			
,					
The new name must be distinguishable and contain the w	ords "Limited Liability Compa	ny," the designation "LLC" or th	c abbrevi	ation "L.L.	.C."
The new name must be distinguishable that contains the					
Enter new principal offices address, if applic	яble:		 		
(Principal office address MUST BE A STREE	T ADDRESS)				
					 _
			-:		
				ال	-
Enter new mailing address, if applicable:			<u>, :</u>		••
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>		-1	_ \tau	
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			— ¿/ []] []	~ <u>~</u>	-
B. If amending the registered agent and/	or registered office add	ress on our records, ent	ter the	name o	f the nev
registered agent and/or the new registered of	ffice address here:		;-	Ç.;	
Name of New Registered Agent:	George G. Pappas				
Hand Of How Registers - Igent	4000 N. Deleber Dd. S	ulto 200			
New Registered Office Address:	1822 N. Belcher Rd., S	Enter Florida street address	<u> </u>		
	Clearwater	, Florida	33765		
	City		Z	lip 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>	<u>Name</u>	Address	Type of Action
AMBR	Christopoulos, Sotirlos	861 N. Hercules Ave.	
		Clearwater, FL 33765	■ Remove
			Change
AMBR_	Tsantilas, Jenny	3017 Key Harbor Dr.	
		Safety Harbor, FL 34695	□ Remove
			☐ Change
			□ Remov e
			Change
			□ Remove
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			Change

		
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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 Note: If the date inserted in this block does not meet the applicable statutory fil document's effective date on the Department of State's records.	(optional) more than 90 days after filing.) Puing requirements, this date wil	irsuant to 605,0207 I not be listed as
ne record specifies a delayed effective date, but not an effective The 90th day after the record is filed.	time, at 12:01 a.m. on	the earlier of
The same and todard is filed.		
Dated July 11 2018		

Page 3 of 3

Filing Fee: \$25.00