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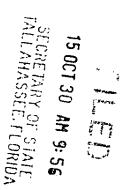
(R	equestor's Name)	
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PICK-UP	MAIT WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	

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COVER LETTER

	ision of Cor		▼ .	
SUBJECT:	Shawn Ellie	ott of South Florida, LLC		
SOBJECT.		Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	n all correspo	ndence concerning this matter	to the following:	
		H. Bradley Ress		
		•	Name of Person	
		Shawn Elliott of South Flo	rida, LLC	
			Firm/Company	
		5060 Bottlebrush Street		
		 	Address	
		Delray Beach, FL 33484		
			City/State and Zip Code	
		hress@me.com E-mail address: (to be used for future annual report notif	ication)
For further i	nformation c	oncerning this matter, please of	-	
H. Bradley	Ress		561 573-6539	
	Name o	f Person		: Telephone Number
Enclosed is	a check for th	ne 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

Shawn Elliott Of South Florida, LLC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company we Florida document number L15000018694	ere filed on 01/30/2015	and assigned
This amendment is submitted to amend the following:	;	
A. If amending name, enter the new name of the limited liability	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	ce address on our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:	<i>f</i>	15 (
New Registered Office Address:	Enter Florida street address	CI 30 A
	City , Florida	77
New Registered Agent's Signature, if changing Registered Agent:	ORIÕA	5 CJ
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of my duties, and I am fa ovided for in Chapter 605, F.S. Or, i	miliar with and f this document is

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
MGR	Ross, David	6860 Lions Head Lane	
		Boca Raton, FL 33496	■ Remove
			☐ Change
MGR	Gutierrez, Manuel	959 Greensward Lane	
		Delray Beach, FL 33445	■ Remove
			☐ Change
MGR	H. Bradley Ress	5060 Bottlebrush Street	■ Add
		Delray Beach, FL 33484	Remove
			Change
MGR	Zach Elliott	282 Anchorage Dr.	■ Add
		Woodbury, NY 11797	Remove
			☐ Change
			Add
			Remove
			Change
			□ Add
			□ Remove
			Change

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Page 3 of 3

Filing Fee: \$25.00