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MAY 04 2016 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: Heart Start	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jackson Francois Name of Person	SECRE TALLAI
Firm/Company 5056 An tana rol #4103 Address Address City/State and Zip Code Thom was by Ckapn 45 & Jahoo, Com E-mail address (to be used for future annual report notification)	16 MAY -2 PM 3: 39
For further information concerning this matter, please call:	
Jackson Francois at 501 4205302 Name of Person Area Code Daytime Telephone Number	_
Enclosed is a check for the following amount: \$\begin{align*} \begin{align*} \be	. Kan
\$25.00 Filing Fee Salono Filing Fee & Solono Filing Fee & Solono Filing Fee & Solono Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	f Status & py

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

EAM ST I AC SOCCERTC, 1/C
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
the Articles of Organization for this Limited Liability Company were filed on $02/12/15$ and assigned orida document number 415000026543
his amendment is submitted to amend the following:
. If amending name, enter the new name of the limited liability company here:
e new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation L.C.
nter new principal offices address, if applicable:
Principal office address MUST BE A STREET ADDRESS)
nter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
. If amending the registered agent and/or registered office address on our records, enter the name of the new egistered agent and/or the new registered office address here:
Name of New Registered Agent: JACKS on Francois
New Registered Office Address: 5056 An Fanorol #4/03 Enter Florida street address 22:1/3
(4 ke Worth Florida 33463
ew 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 **Title Type of Action** HATOINE, MARC 639 East Oceoin we while Add _□ Change SE Francois, Diestel 639 East & cem #de Suite 108
Botton 13ench Fl. 33435.

Add Remove _□ Chaħ�� □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add

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if an eff Note:	ive date, if other than the date of filing: (optional) (certive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursually the date inserted in this block does not meet the applicable statutory filing requirements, this date will not tent's effective date on the Department of State's records.	ant to 605.0207 of be listed as
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	e earlier of
Dated	Jacon from Cory Signature of a member or authorized representative of a member	
	JACKSON Fran Cois	

Page 3 of 3

Filing Fee: \$25.00