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JUNE PART OF STATE ALLAHASSEE, FLORIDA

AUG 0 6 2015

Y SULKER

COVER LETTER

TO: Registration Section Division of Corpora			
SUBJECT: Flo	ort la Debr Name of Limite	is Mana gerhant d Liability Company	LLC
The enclosed Articles of Ame	endment and fee(s) are submi	itted for filing.	
Please return all corresponder	nce concerning this matter to	the following:	
-	Devon.	Donald Soll Name of Person	
-	(See Der	Firm/Company	quor:
_	1205.	Anoka Ana	
_	Avon	Park FL 3	3825
_	E-mail address: (to	City/State and Zip Code Output De used for future annual report notification	· Net
For further information conce	erning this matter, please call	l:	
Dellon!	mobilisher	at(<u>\$63)</u> 453	2335
Name of Per	son	Area Code Daytime Tel	ephone Number
Enclosed is a check for the fo	ollowing amount:		
\$25.00 Filing Fee	330.00 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

11/1

Florida 1	<u> </u>	(NONO ?	T MONISE	<u> </u>	
(<u>Name of the Limited</u>	Liability Compa	ny as it now appears o liability Company)	n our records.)		
The Articles of Organization for this Limited Lia			0/10/15	and assig	ned
· \		were med on		and assig	,
Florida document number 45000	ガヌみずら				
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of	he limited liab	ility company here	:		
The new name must be distinguishable and contain the wo	rds "Limited Liabil	hity Company." the design	enation "LLC" or the a	bbreviation "L.L	.C."
<u>e</u>		11011	— × <i>Π</i>	7	
Enter new principal offices address, if applica	ble:	11011	1 with	<u>K</u>	
(Principal office address MUST BE A STREET	ADDRESS)	Sebri	no FC	3381	(<u> </u>
			7		(
				,	
		1101 -	711 0	0	
Enter new mailing address, if applicable:		11011	im, Nid K	300 7	n
(Mailing address MAY BE A POST OFFICE B	OX)	Solor,	NO PC	-355 <u>%</u>	9
			2	돌	.
				SS &	E STATE TO
B. If amending the registered agent and/o	r registered o	ffice address on o	ur records enter	inamine o	fêthê nev
registered agent and/or the new registered off	ice address her	e:	di records, <u>enter</u>		i man z
		_			Co. beauty
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Name of New Registered Agent:		1000 000	with mu		
New Registered Office Address:	130	5 AND	kg the		
		Enter Florida	a street address	00.	
	1100V	Howa	, Florida	7885	
		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.

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
War.	Trais E. Cross	11011 Twitty 20	
		Sobring FL 33874	⊃ □ Remove
			Change
Ngr	Down G. Crosson	11011 Tw. Hy RQ	
		Sebring Fl 33876	□ Remove
			Change
Ngc	Deesey K Payre	Sobring PL 33876	on Add ∷
		Sobring FL 33876	ω □ Remove!
			Change
flox	Veather Payne	Sebring Fr 33876	Add
y		Sebring Fr 33874	🗆 Remove
	•	J	□ Change
Max	Harn Cany	4405 Cremong Dr.	
	3	Sobring FL 33872	Remove
			Change
Mar	Corstiana Parry	4405 Coemana Dr	□ Add
-	•	4405 Coreners On Debring Fr 3382	Remove
		O	□ Change

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 = AMBR =	Manager Authorized Member	į		
<u>Title</u>	<u>Name</u>		Address	Type of Action
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			4015 Stiles larg Sebring & 33875	Remove
				Change
Max	Kinkalia	e Walder	Has Stiles Lang	Add
			Sobring FL 33875	Remove
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			AK AK AK SS	Remove
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		nis block does no he Department o			statutory min	g requiremen	iits, titis ua	ue wiii ii	or be in	sieu as i
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00