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Amend

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I ALBRITTON

COVER LETTER

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	amendment and fee(s) are subdence concerning this matter	mitted for filing.	
	dence concerning this matter	•	
Il correspon		to the following:	
	Andrew Saphos		
	London Holdings LLC	Name of Person	
	18886 Pampass Grass Lane	Firm/Company	
	Lutz, FL 33558	Address	
	dsaphos@yahoo.com	City/State and Zip Code	
ormation co			fication)
ns		407 913-0748	
Name of	Person	Area Code Daytim	ie Telephone Number
heck for the	following amount:		
ing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Name of heek for the	Lutz, FL 33558 Lutz, FL 33558 dsaphos@yahoo.com E-mail address: commation concerning this matter, please commander the same of Person Name of Person B \$30.00 Filing Fee &	London Holdings LLC

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

London Holdings, LLC			
(Name of the Lin	ited Liability Company as it no (A Florida Limited Liability C	ompany)	-
The Articles of Organization for this Limited	ed on 02/26/2015	and assigned	
Florida document number £15000036466	·		
This amendment is submitted to amend the fo	lowing:		
A. If amending name, enter the new name	of the limited liability com	ipany here:	
The new name must be distinguishable and contain the	words "Limited Liability Compa	any," the designation "LLC" or t	
Enter new principal offices address, if appli	cable:	-	- 12 B - 1
(Principal office address MUST BE A STRE	ET ADDRESS)		13 13
Enter new mailing address, if applicable:			PH 33
(Mailing address MAY BE A POST OFFICE	E BOX)		
B. If amending the registered agent and registered agent and/or the new registered agent. Name of New Registered Agent:		dress on our records, <u>en</u>	ter the name of the nev
	2711 Letap Ct, Suite 101		
New Registered Office Address:	t	Enter Florida street address	
	Land O Lakes	Florid:	a 34638
	Cuy		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>	<u>Address</u>	Type of Action
1)	Kathleen Saphos	18886 Pampass Grass Ln	
			= Add
		Lutz FL 33558	_
			☐ Remove
			Change
			. 🔲 Remove
		4	☐ Change
			Remove
			☐ Change
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C. Cffantina data if other than t	ha daea of Clina		(untimul)
E. Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	block does not meet the appli	cable statutory filing require	ments, this date will not be listed
If the record specifies a delay (b) The 90th day after the re		ot an effective time, a	: 12:01 a.m. on the earlier
November 8	2018		
Dated	··	<u> </u>	
(~V			

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee