L15000043011

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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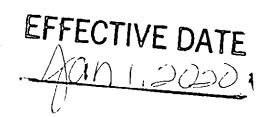
Registration Section Division of Corporations

TO:

SRS PA PI SUBJECT:	ROPERTY MANAGEMENT I	LLC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Gloria A. King	
	•	Name of Person	
		Sheetz, Inc.	
		Firm/Company	
	5700 Sixth Avenue		
	Address		
		Altoona, PA 16602	
		City/State and Zip Code	
		gking@sheetz.com	
	E-mail address: (to be used for future annual report n	otification)
For further information of	concerning this matter, please c	all:	
Gloria A. King			-5110
Name o	f Person	at () Area Code Dayt	ime Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addres</u> Registration		Street Address: Registration S	Section
Division of C	Corporations	Division of C	orporations
P.O. Box 632		The Centre of	
Tallahassee.	F1. 32314	2415 N. Moni	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SRS PA PROPERTY MANAGEMENT LLC

(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 L	iability Company were filed on	March 10, 2015	and assigned
Florida document numberL15000043011	···································		
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited liability company here:		
	N R. SHEETZ PA PROPERTY MGMT.		
The new name must be distinguishable and contain the v	words "Limited Liability Company," the desig	nation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applic	rable:		
(Principal office address MUST BE A STREE	ET ADDRESS)) v v	2019 . SEC
		<u>-</u>	
			N C
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	· · · · · · · · · · · · · · · · · · ·	
		•	99
			Φ
B. If amending the registered agent and/or ragent and/or the new registered office address		rds, enter the name	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida :	street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi being filed to merely reflect a change in the company has been notified in writing of this	oer and complete performance of my istered agent as provided for in Chap registered office address, I hereby c	duties, and I am fai pter 605, F.S. Or, if	niliar with and This document is

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>	Name	Address	Type of Action
			🗆 Add
			□Remove
			□Change
			🗆 Add
		<u></u>	□Remove
			□ Change
			□Add
			□Remove
			□Change
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			□Remove
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			□Remove
			□Change

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It tall effective date to the early the	k does not meet the applicable statutor;	optional) ng or more than 90 days after tiling.) Pursuant to 605.0207 or y tiling requirements, this date will not be listed as t
e record specifies a delayed effective rd is filed.	late, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th day after the
Dated	2019	
		_
<u></u>	gnature of a member or authorized represen	ntaive of a member
	Stanton R. Sheetz	
	Typed or printed name of sig	gnee

Filing Fee: \$25.00