## 115000043949

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

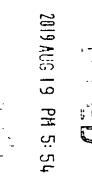
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## **COVER LETTER**

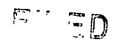
TO:	Registration Se Division of Cor		?	on and the second of the seco			
SURIF	SUBTILIS.	, LLC		·			
Name of Limited Liability Company							
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please r	eturn all correspo	ondence concerning this matter	to the following:				
		FRANCISCO GOMEZ					
		SUBTILIS, LLC	Name of Person	•——			
		638 103 AVE NORTH	Firm/Company				
		NAPLES, FL 34108	Address	<del></del>			
		ALLINIJOSE@GMAIL.CO	City/State and Zip Code OM				
r e d			to be used for future annual report noti	fication)			
		oncerning this matter, please ca	all:				
FRANC	CISCO GOMEZ		239 273-5829 at ()				
	Name o	f Person	Area Code Daytim	e Telephone Number			
Enclose	d 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



SUBTILIS, LLC

2019 Alig 19 PM 5: 5

(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L15000043949	were filed on 03/11/2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	638 103 AVE NORTH
(Principal office address MUST BE A STREET ADDRESS)	NAPLES, FL 34108
Enter new mailing address, if applicable:	638 103 AVE NORTH
(Mailing address MAY BE A POST OFFICE BOX)	NAPLES, FL 34108
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our records, <u>enter the name of the nev</u> <u>e</u> :
New Registered Office Address:	
	Enter Florida street address
	, Florida
Nam Designated According to the Control of the Cont	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>	<u>Address</u>	Type of Action
AMBR	JAMES LOVE	8109 DAHLIA DR #1306	
ANDK			
		NAPLES, FL 34113	
			Remove
			<b></b>
	FRANCISCO GOMEZ	P.O.BOX 112125	Change
MNG	PRANCISCO GOMBZ	F.O.BOX 112123	
		NAPLES FL 34108	D Add
			■ Remove
			<del> </del>
		<del></del>	Change
MNG	FRANCISCO GOMEZ	638 103 AVE NORTH	
		<del></del>	Add
		NAPLES, FL 34108	
			Remove
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(If an effe	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated <sub>.</sub>	At 19.
	Signature of a member or authorized representative of a member
	FRANCISCO GOMEZ

Page 3 of 3

Filing Fee: \$25.00