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APR 20 2015

## **COVER LETTER**

Division of Cor	porations		
SUBJECT: 5 DOUB	LE YOU'S, LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ETHAN H WEISS		
		Name of Person	
	FISHACK		
		Firm/Company	
	1931 OLD DIXIE HIG	GHWAY	
		Address	
	VERO BEACH, FLO	RIDA 32960	
		City/State and Zip Code	
	FISHACKVERO@AC	DL.COM to be used for future annual report notifi	(mation)
Ear further information a		·	cation
	oncerning this matter, please ca		
ETHAN H WEISS		772 770-0977	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	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)
MAII.	ING ADDRESS:	STRFFT/COURI	FR ANNRESS:

TO:

**Registration Section** 

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE TOD

15 MAR 31 PH 12: 41

SECTION AND SEATE HALLAMASSEE, FLORIDA

5 DOUBLE YOU'S, 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 Liability Comp	pany were filed on MARCH 2	0, 2015 and assigned
Florida document number L15000050910		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and end with the words "Limited	Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere	d office address on our rec	ords enter the name of the new
registered agent and/or the new registered office address		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ac	ddress
		, Florida
	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JO A WEISS	1931 OLD DIXIE HIGHWAY	
		VERO BEACH, FL 32960	■ Remove
MGR	MITCHELL S WEISS	1931 OLD DIXIE HIGHWAY	
	•	VERO BEACH, FL 32960	■ Remove
MGR	ALISSA J WEISS	1931 OLD DIXIE HIGHWAY	
		VERO BEACH, FL 32960	■ Remove
MGR	ALEXANDER B WEISS	1931 OLD DIXIE HIGHWAY	
		VERO BEACH, FL 32960	■ Remove
			Add
			Remove
			□ Add
			Remove

	dditional sheets, if necessary
ffective date, if other than the date of filing:  ne effective date must be specific, cannot be prior to date of receipt or filed date and cannot the date this document is filed by the Florida Department of State)	(optional) annot be more than 90 days after
, MARCH 25 , 2015	
Dated WARCH 25	
Signature of a member or authorized represer	stative of a member
rated,	stative of a member

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Filing Fee: \$25.00