## L150000 57557

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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J SHIVERS

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

! HE DOATS WITH	ited Liability Con (A Florida Limit	mpany as it now appears on or ted Liability Company)	our records.)	
The Articles of Organization for this Limited Florida document number <u>L 1560065</u>		any were filed on <u>3/3</u>	5/2015	and assigned
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited li	iability company here:		
The new name must be distinguishable and contain the				
The new name must be distinguishable and contain the	words "Limited Li	iability Company," the designa	ation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if appl	icable:	NC		
(Principal office address MUST BE A STRE	(ET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX)</u>			
B. If amending the registered agent an registered agent and/or the new registered			records, <u>enter t</u>	he name of the no
Name of New Registered Agent:	NC	,		
New Registered Office Address:				
		Enter Florida st	reet address /	
			, Florida	Zip Code
		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 of removed from our records:

MGR = Ma AMBR = Au	inager ithorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	THOMAS A. Schumact	8460 Gulf BLVD 101 WAVARAGE BEAGE FL 32	ZAdd  SGG  Remove
	t .		☐ Change
AMBR	KARLIE Burkhardt	NAVARRE BEACH FL 36	2 □ Add 2 5 • 6 ← □ Remove
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lote:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier o
	90th day after the record is filed.
The	
The	90th day after the record is filed.

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