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PICK-UP	☐ WAIT	MAIL
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(Docu	ument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

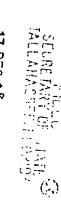
Office Use Only



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COVER LETTER

TO:			, ,	•
SUBJ	Yodel Ma ECT:	Yodel Management, LLC Name of Limited Liability Company Osed Articles of Amendment and fee(s) are submitted for filing.		
			ted Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub-	ement, LLC Name of Limited Liability Company Endment and fee(s) are submitted for filing. Ince concerning this matter to the following: Sandra J. Myers Name of Person Firm/Company 14540 Farrington Way, Unit 101 Address Ft. Myers, FL 33912 City/State and Zip Code jm523@aol.com E-mail address: (to be used for future annual report notification) erning this matter, please call: at (4) Area Code Daytime Telephone Number	
Please	Pilvision of Corporations Yodel Management, LLC ECT: Name of Limited Liability Company eclosed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: Sandra J. Myers Name of Person Firm/Company 14540 Farrington Way, Unit 101 Address Ft. Myers, Ft. 33912 City/State and Zip Code sjm523@aol.com E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: a J. Myers Name of Person Area Code Daytime Telephone Number eed is a check for the following amount: 5.00 Filing Fee Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy			
		Sandra J. Myers		
			Name of Person	
			Firm/Company	
		14540 Farrington Way, Un	it 101	
			Address	
		Ft. Myers, FL 33912		
			City/State and Zip Code	
		sjm523@aol.com		
		E-mail address: (t	o be used for future annual report notifi	cation)
For fu	rther information co	oncerning this matter, please ca	II:	
Sandr			at ()	
	Division of Corporations Yodel Management, LLC Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. se return all correspondence concerning this matter to the following: Sandra J. Myers			
Enclos	sed is a check for th	e following amount:		
■ \$2	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

Yodel Management, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comparing document number 1.15000054944	any were filed on March 27, 2015	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited l	iability company here:	
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the	he abbreviation "L.L.C."
nter new principal offices address, if applicable:	14540 Farrington Way	
Principal office address MUST BE A STREET ADDRESS	Unit 101	<u> </u>
	Ft. Myers, FL 33912	<u> </u>
nter new mailing address, if applicable:	14540 Farrington Way	C 2
Aailing address MAY BE A POST OFFICE BOX)	Unit 101	
	Ft. Myers, FL 33912	??
		~ 20
. If amending the registered agent and/or registered egistered agent and/or the new registered office address have a Name of New Registered Agent:	· —	ter the name of the n
Name Barriage 14540 Farri	ngton Way, Unit 101	
New Registered Office Address: 14340 Fam	Enter Florida street address	<u> </u>
Ft. Myers	, Florida	33912
	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>	Address	Type of Action
AMBR	Sandra J. Myers	14540 Farrington Way	
		Unit 101	□ Remove
		Ft. Myers, FL 33912	☐ Change
			□ Remove
			Change
			🗆 Remove
			Change
			□ Remove
			Change
			Remove
			Change
			□ Remove
			□ Change

Effective date, if other than the date of filing: (aptional) If an effective date, is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document is effective date on the Department of State's records. The 90th day after the record is filed. Dated December 6 2017 2017 2017 2017 2017 2017				
Effective date, if other than the date of filing: [Aptional] (aptional) (aptional) (an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filed. December 6 2017	-			
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Sandy () Mul	Dated	December 6 2017		
Sandy Myb				
Signature of a member or authorized representative of a member		11100110		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00