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## **COVER LETTER**

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TO: Registration Se Division of Cor				
SUBJECT:2	2901 BROADU Name of Limi	UAY, LLC ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are subr	nitled for filing.		 
Please return all correspo	ndence concerning this matter t	o the following:		
71	DEN	LS HOLMES		CTARY:
H 	2901 BR	Firm/Company		
	2600 Q	JANTUM BLUD	)	*****
		BEACH, FL 33 City/State and Zip Code		
	DENIS Q BEACH	o be used for future annual seport notif	Cation)	
For further information of	oncerning this matter, please ce	di:		
DENIS	HOLMES		4-0353 Telephone Number	
Name (	of Person	Area Code Dayune	. I sieptiono i sanos	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fer Certificate of St Certified Copy (additional copy is	atus &

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
Tullahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION isbility Company as it now appears on our records.) loride Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number \_ 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 contain 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City 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>	Name	Address	Type of Action
M	OLIVIA HOLMES	2600 QUANTUM BWB	
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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E. Effective date, if other than the date of filing:  (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.) Pursu  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	iant to 605.0207 (3)(b) of be listed as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on th (b) The 90th day after the record is filed.	ne earlier of:
Dated MAY 25 , 2018.	
eignature of a member or authorized representative of a member	
DENIS HOLMES, MANAGETL Plyped or Brinted name of signee	AMD KAY 25 AK II SELAETARY OF SI
Page 3 of 3	AHIO: 06
Filing Fee: \$25.00	WATER OF