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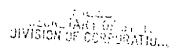
M. MILLIGAN JUL 2 4 2017:

COVER LETTER

	Registration Se Division of Cor			
SUBJEC	т:Вга	Owning L. 2wn on Name of Lim	CRIE & L. 2nD ited Liability Company	Clearing 11C
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Jeremy Bro	Name of Person	·
		JBrowning L	Firm/Company	and Clearing 11c
		257 E09+	Betony Brench W. Address	2 Y
		st. Johns	FL 32259 City/State and Zip Code	
		JB/2nD <td>to be used for future annual report noti</td> <td>fication)</td>	to be used for future annual report noti	fication)
For furthe	er information co	oncerning this matter, please co	all:	
Jer	7 my Bro Name o	Person	at (9 oly) 806- Area Code Daytim	9512 e Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	0 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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce	on vations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



17 JUL 24 AM 9: 20

TBrowning Lewn Core & Lend Clean, 110 (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 Company were filed on OS/2015 and assigned Florida document number L 150000818Z1 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: 257 1575+ Betony Brench wey

Enter Florida street address

St. Johns . Florida 32259

City Zip Code New Registered Office Address:

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 faccept 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

Title	<u>Name</u>	Address	Type of Action
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			☐ Change
AMBT	Con tomling on	JAK, FC 32220	Add
		JWC, FC 3	Remove
			Change
	Vickie Lemen		Add
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