

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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COVER LETTER

Division	of Corporations					
BCL SUBJECT:	P 3-1 SODO LLC					
SUBJECT:	Name of Limited Lial	pility Company	, 			
The enclosed Artic	les of Amendment and fee(s) are submitted	for filing.				
	rrespondence concerning this matter to the f					
	KATHERINE TIPITINO					
	•	Name of Person				
				Z-12	35	
		Firm/Company			33	
2190 BELCHER RD S SUITE B					 0	FILED
Address LARGO FL 33771				-0 -0		
					ধ্য	
	•	State and Zip Code	-	34	င္မ	
	KATHY@PROLUXEPROPERTII					
	E-mail address: (to be us	ed for future annual	report notification)			
For further inform	ation concerning this matter, please call:					
KATHY TIPITIN	O	727 53	2-3020			
	Name of Person	Area Code	Daytime Telephone Nu	mber	_	
Enclosed is a chec	k for the following amount:					
\$25.00 Filing	Fee \$30.00 Filing Fee & \$3 Certificate of Status	\$55.00 Filing Fee Certified Copy (additional copy is en	Cert	00 Filing Fo tificate of S tified Copy tional copy is	Status	
	MAILING ADDRESS:	STREE	T/COURIER ADDRES	SS:		

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

(Name of the Limited	Habilita Campany as it now appears on our	managed A
(Name of the Limited) (A	Liability Company as it now appears on our Florida Limited Liability Company)	recorus.)
The Articles of Organization for this Limited Liab lorida document number \frac{L15000102826}{}	oility Company were filed on 06/12/15	and assigned
his amendment is submitted to amend the follow	ving:	
a. If amending name, <u>enter the new name of t</u>	he limited liability company here:	
he new name must be distinguishable and contain the word	ds "Limited Liability Company," the designatio	in "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		SECRITA SECRITA
Mailing address MAY BE A POST OFFICE BO	<u></u>	SAR I I
3. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our r ce address here:	records, enfer the name of the
Name of New Registered Agent:	,	
New Registered Office Address:		
	Enter Florida stree	t address
	(1)	, Florida
	City	Zıp Code

New Registered Agent's Signature, if changing Registered Agent:

DOLD 2 1 CODO LLO

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	RYAN STUDZINSKI	2190 BELCHER RD S SUITE B	
		LARGO FL 33771	≅ Remove
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			Remove
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If amending any other info		_		-	cessary.)	
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Effective date, if other tha (If an effective date is listed, the da Note: If the date inserted in t document's effective date on	te must be specific a his block does not	and cannot be prior to t meet the applica	o date of filing or mable statutory filing	ore than 90 days after	tional) er filing.) Pursuant to o nis date will not be l	605.0207 (3 isted as th
the record specifies a de The 90th day after the	ayed effective e record is filed	e date, but not d.	an effective t	ime, at 12:01	a.m. on the ea	rlier of:
Dated 9-7	Ginatura	a member or author	rized representative	of a member		-
Lathe	Signatureon	. ~ . +	d name of signee			-

Page 3 of 3

Filing Fee: \$25.00