## 1500134842

()	Requestor's Name)	
(,	Address)	
	Address)	
	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(i	Business Entity Name)	<u> </u>
(	Document Number)	
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## **COVER LETTER**

то:	Registration Se Division of Cor			
eum		ESTMENTS LLC		
SUBJ	ECT:	Name of Lim	ited Liability Company	
The er	nclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
		CAROLINA MENEGHET	rrı	
			Name of Person	
		SAFETY BUSINESS LLC		
		-	Firm/Company	
		6220 S ORANGE BLOSS	OM TRAIL SUITE 600	
			Address	
		ORLANDO, FL 32809 - U	JS	
			City/State and Zip Code	
		SUPPORT@SAFETYTAX	COM to be used for future annual report notifi	
			·	canon)
For fu	rther information co	oncerning this matter, please co	all:	
CAR	OLINA MENEGHI	TTI	407 888 4747	
	Name of	l'Person	at () Area Code Daytime	Telephone Number
Enclos	sed is a check for th	e following amount:		
<b>□</b> \$2	25.00 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)

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

GRAI. INVESTMENTS LLC		
( <u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records.)  Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on	and assigned
Florida document number L15000134842		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	(ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	-	
maning address may 11 1001 01 11 100 1001		
B. If amending the registered agent and/or regis		enter the name of the
registered agent and/or the new registered office add	ress nere:	
Name of New Registered Agent:		- <u>:</u>
		17
New Registered Office Address:	Enter Florida street address	
	, Floric	da i Ç
	City	Zip Gode
New Registered Agent's Signature, if changing Registered	d 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

Iwamending 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
MBR	ALBERTO E PASSADOR	5575 S SEMORAN BLVD #2	
		ORLANDO, FL 32822	■ Remove
			☐ Change
MBR	Pass Investments and Business LLC	11249 MACAW CT	<b>■ A</b> dd
		WINDERMERE, FL 34786	☐ Remove
		<del></del>	☐ Change
	<del></del>		<b>△ A</b> dd
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ive date, if other than the date of filing: fective date is listed, the date must be specific and c			optional) s after filing.) Pursuant to
If the date inserted in this block does not me ent's effective date on the Department of Sta	et the applicable statute		
ient's effective date on the Department of Sta	ie's records.		
cord specifies a delayed effective da	te hut not an effe	ctive time at 12:	01 am on the ea
90th day after the record is filed.	e, but not an ener	cuve time, at 12.	or a.m. on the ea
		1	
June 23	2017		
	- (	,	

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Typed or printed name of signee

Filing Fee: \$25.00