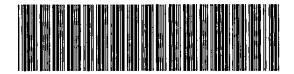
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(Re	questor's Name)	
(Ad	dress)	-
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(Cit	y/State/Zip/Phone #	()
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	·)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
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COVER LETTER

TO: Registration Se Division of Cor				
GREENE GREENE	CANFIELD DEGEORGE, LLO	0		
SOBSECT.	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	KENT RUNNELLS			
		Name of Person		
	KENT RUNNELLS, P.A.			
		Firm/Company		
	531 MAIN STREET, SUI	TE F		
		Address		
	SAFETY HARBOR, FL	34695		
		City/State and Zip Code		
	KRPALAW@TAMPABA	Y.RR.COM		
	E-mail address: (to be used for future annual report notif	ication)	
For further information of	concerning this matter, please c	all:		
KENT RUNNELLS		727 726-2728 at ()	2015 SEC ALL.	•
Name o	of Person	Area Code Daytime	SECRETARY ALLAHASSI	
Enclosed is a check for t	he following amount:			m
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified Copy (additional copy is englosed)	Ö

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

GREENE CANFIELD DEGEORGE, LLC	
(Name of the Limited Liabili (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number L15000139002	Company were filed on 08/13/2015 and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	ited liability company here:
The new name must be distinguishable and contain the words "Lim	nited 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 ADDI	RESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, <u>enter the name of the new</u> <u>lress here</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address Enter Florida street address
	, Florida <u>∽> N</u> [*
	City Ziel Coate W
New Registered Agent's Signature, if changing Registere	ALAZERIC C
provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the registere	and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with that agent as provided for in Chapter 605, F.S. Or, if this document is ed 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	Name	Address	Type of Action	
MGRM	ANTHONY R. DE GEORGE		□ Add	
	aug R. Day	2074 Weaver Park Drive, Clearwater, FL 33765	Remove	
			Change	
MGR	ANTHONY R. DE GEORGE	2074 Weaver Park Drive, Clearwater, FL 33765	_ 🖬 Add	
	andy R. Do. Y		🗆 Remove	
			Change	
AMBR	CHRISTINE DE GEORGE		🗆 Add	
	Christue de Gage	2074 Weaver Park Drive, Clearwater, FL 33765	_ ■ Remove	
			_D Change	
MGR	CHRISTINE DE GEORGE	2074 Weaver Park Drive, Clearwater, FL 33765	_ ■_∆ dd	
	Chustme DaGeage		ALL SECONOVES	w _{iller}
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Note: If	date, if other than t ive date is listed, the date r the date inserted in this t's effective date on the	block does not me	et the applicable s	e of filing or more than 9 statutory filing require	(optional) Odays after filing.) Pursu ments, this date will n	ant to 605,0207 ot be listed as t
	rd specifies a delay Oth day after the r		ite, but not an	effective time, at	12:01 a.m. on th	ne earlier of:
Dated <u>S</u>	Sept. 21	1 R	2015 Oe L	representative of a mem	her.	
		Signature of a m	cimpal of agriconsen	representative of a mem	QCI	

Page 3 of 3

Filing Fee: \$25.00