1500018	50959
(Requestor's Name) (Address) (Address)	200301745752
(City/State/Zip/Phone #)	07/28/1701015008 ★★25.00
Office Use Only	17 JUL 28 PH 4: 14 17 JUL 28 PH 4: 14 17 DUL 28 PH 4: 14 17 DUL 28 DE TORIDA
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COVER LETTER

ТО:1		tration Section ion of Corporatio	ons					
SUBJE	CT:	SIPHON	(•	JDUS	NEIE	S (LC	
				Name of Li	mited Liabi	lity Comp	any	
The enc	losed 2	Articles of Amend	ment and	d fee(s) are su	binitted fo	or tiling.		
Please r	eturn a	ll correspondence	concern	ning this matte	r to the fo	llowing:		
				SEAN) G	Port	Ē	
						ume of Per		
Firm/Company						· · ·		
		<u> </u>	362	LAKE	BAL	ωιΝ	LANE	UNIT 301
						Address		
				ORLAND	0 , P	FL	328 . p Code	14
			SEA	NMGR	OVE A	<u>G</u>	annual report n	Com
			I	ti-mail address.	(to be user	for future	annual report n	outication)
For furt	her info	ormation concerni	ng this n	natter, please	call:			
		• • • • •	_					

SEANGROVEat (407)963-6694Name of PersonArea CodeDaytime Telephone Number

Enclosed is a check for the following amount:

☑ \$25.00 Filmg 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

SIPHON INDUSTR	ZIES LLC
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jability Company)
The Articles of Organization for this Limited Liability Company	were filed on 09/01/2015 and assigned
Florida document number <u>L 15000 150 959</u>	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	<u>lity company here</u> :
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1365 LAKE BALDWIN LANE
(Principal office address MUST BE A STREET ADDRESS)	UNIT 301
	ORLANDO, FL 32814
Enter new mailing address, if applicable:	1365 LAKE BALOWIN LAWE
(Mailing address MAY BE A POST OFFICE BOX)	UNIT 301
	ORLANDO, FL 32314

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	ldress
	Спу	, Florida Zıp Code

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 fumiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this decument 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

PH

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	ANGEL BAEZ	4525 ROSS LANIER LN	Add
		KISSIMMEE, FL 34758	Remove
			🗆 Change
			🗆 Add
		<u></u>	Remove
			🗆 Change
			🛛 Add
			Remove
			_□ Change
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			_🗖 Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated JULY 24th . 2017.	<u> </u>	17	
		JUL	
Signature of a member of a member		23	
SEAN GROVE		PH	5
Typed or printed name of signee		. .	
Page 3 of 3		- 6 -1	

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Filing Fee: \$25.00