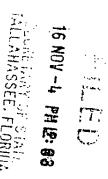
L15000174266

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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COVER LETTER

Division	n of Corporations	
ELT SUBJECT:	TROLLEY LLC	
SUBJECT.	Name of Limited Liability Company	
The enclosed Art	rticles of Amendment and fee(s) are submitted for filing.	
Please return all o	correspondence concerning this matter to the following:	
	NELSON BALLESTEROS	
	Name of Person	
	Firm/Company	
	2393 S CONGRESS AVE STE 223	
	Address	
	PALM SPRING, FL 33406	
	City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
For further inform	rmation concerning this matter, please call:	
NELSON BALL	LESTEROS 561 2536070 at ()	
	Name of Person Area Code Daytime Telephone Number	
1		
Enclosed is a che	eck for the following amount:	
\$25.00 Filing	rg Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Sta (additional copy is enclosed) Certified Copy (additional copy is enclosed)	atus &

MAILING ADDRESS:

TO:

Registration Section

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

EL TROLLEY LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L15000174266	were filed on FLORIDA and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2031 6TH CT S
(Principal office address MUST BE A STREET ADDRESS)	LAKE WORTH, FL 33461
Enter new mailing address, if applicable:	2031 6TH CT S
(Mailing address MAY BE A POST OFFICE BOX)	LAKE WORTH, FL 33461
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Enter Florida street 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 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.

City

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		LAKE WORTH FL 33461	Remove
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			Charge PLOAM ART Remove
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(optional) date of filing or more than 90 days after filing.) Pursuant to 605.02		ote: If the date inserted in this block does not meet the applicable statutory fil	ing requirements, this date will not be li	sted
date of filing or more than 90 days after filing.) Pursuant to 605.02	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed	cument's effective date on the Department of State's records.		
date of filing or more than 90 days after filing.) Pursuant to 605.02	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ocument's effective date on the Department of State's records.			
date of filing or more than 90 days after filing.) Pursuant to 605.02	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed		time, at 12:01 a.m. on the ear	lier
date of filing or more than 90 days after filing.) Pursuant to 605.02 le statutory filing requirements, this date will not be listed a	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed accument's effective date on the Department of State's records.	NOVEMBED 01 2013		
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date of filing or more than 90 days after filing.) Pursuant to 605.020 le statutory filing requirements, this date will not be listed a	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ocument's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed.	nted NOVEWBER 01		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00