L 15000178526					
(Requestor's Name) (Address) (Address)	900281460919 15-178526				
(City/State/Zip/Phone #)	01/28/1601014014 **25.00 NCAMENC				
(Business Entity Name) (Document Number) Certified Copies Certificates of Status					
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	S OF AMENDM TO OF ORGANIZA OF	-	. .
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(Name of the Limited Liabilit (A Florida	Company as it new apper v Company as it new apper Limited Liability Company	Ears on our records.)	<u></u>
The Articles of Organization for this Limited Liability Constrained Florida document number <u>150001785</u>	ompany were filed on _ 2.4	10/20/15	and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limit</u> <u>Leselve</u> 10399 NI	NLLC		
The new name must be distinguishable and contain the words "Limi	ted Liability Company." the	designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDR	<u>ESS)</u>		
Enter new mailing address, if applicable:			HE 28
Mailing address MAY BE A POST OFFICE BOX)			The P
	2,351 . · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or registered agent and/or the new registered office address of New Registered Agent:	ered office address o ess here:	in our records, <u>entei</u>	the name of the new
	······································		<u> </u>
New Registered Office Address:	Enter Fl	orida street address	
1 I			
	City	, Floridá	Zip Code
ew Registered Agent's Signature, if changing Registered	Agent:		
hereby accept the appointment as registered agent a rovisions of all statutes relative to the proper and con ccept the obligations of my position as registered age eing filed to merely reflect a change in the registered ompany has been notified in writing of this change.	mplete performance o ent as provided for in	of my duties, and I am Chapter 605, F.S. Or	familiar with and , if this document is
Build of the second state	If Changing Registered A	sent. Signature of New R	egistered Agent

Page 1 of 3

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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 = M $AMBR = A$	anager uthorized Member			· · · · · · · · · · · · · · · · · · ·
<u>Title</u>	Name		Address	ype of Action
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