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2015 DEC 18 PM 5: 16

K.SALY EXAMINER DEC 18 2015

COVER LETTER

TO: Registration Secti Division of Corpo			, , , ,
SUBJECT: Suc	cculent Name of Limit	ed Liability Company	LC_
		· · · V	
The enclosed Articles of An	nendment and fee(s) are subm	nitted for filing.	
Please return all correspond	ence concerning this matter to	the following:	
	ReLecca	Name of Person	
		Firm/Company	· ·····
	87 Ook	Shade Roa. Address	<u> </u>
	Gaithe	City/State and Zip Code	20878
	E-mail address: (to	be used for future annual report notifical	tion)
	cerning this matter, please cal		
Rebecca Name of P	Henry	at (<u>301</u>) <u>576</u> Area Code Daytime Te	9915 Elephone Number
Enclosed is a check for the	following amount:		
\$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

100	1/	E	$ f\rangle$
2015 DEC	18	PH	<i>-</i>

	OF	2015 DEC 10
Succulent (Name of the Limited L	iability Company as it now appears or lorida Limited Liability Company)	2015 DEC 18 PM 5: 16 TATALORE JAMES LOUR records. AMASSE EL FLORID 12-04-15 EL FLORID
The Articles of Organization for this Limited Liabil	lity Company were filed on <u>De</u> 181.35	cember and assigned
This amendment is submitted to amend the following		
A. If amending name, enter the new name of the	e limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	IDDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>X)</u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ur records, <u>enter the name of the new</u>
Name of New Registered Agent:	- 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 - 1/4 -	
New Registered Office Address:	Enter Florida	street address
		, Florida
_	City	Zip 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 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

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 = Ma AMBR = Au	nager thorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Rebecce L. Henry	87 Out Shade R	□ Add
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4	ve date, if other than the date of filing: (optional)
effe	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier
he	90th day after the record is filed.
	7 /2/15 3-15
ted_	December 15, 2015.
	Peheco Henry Signature of a member or authorized representative of a member Rebecca Henry Typed or printed name of signee
	Lenur / Lui

Page 3 of 3

Filing Fee: \$25.00