L15000187135

Office Use Only



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K. SALY NOV 2 2018



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

Date: November 01, 2018			Accounts: 120000000000	
Name: KEN H	OWELL			
Reference #:	1008553			
Entity Name:	3607 SIENA	RIDERS LLC	_	
Articles of Incorp	oration/Authoriza	ation to Transact Busine	ess	
✓ Amendment				
Change of Agent	ISSUES? CALL			
Reinstatement		KEN:		
☐ Conversion			518-213-0738	
Merger				
☐ Dissolution/Witho	drawal			
☐ Fictitious Name				
Other	· · · · · · · · · · · · · · · · · · ·			
Authorized Amount:	\$25.00)		
Signature			•	

+44 (0)20.3786.1090

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



The Articles of Organization for this Limited Liability Company were filed on November 4, 2015 and assigned Florida document number L15000187135

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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

Enter Florida street address

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: 18 NOV - 1 AH 1: 20
SECRETARY SEE, FLORIDA

Add MGR = Manager AMBR = Authorized Member Address **Title** Name THE STACY D. DRAZAN 3607 Siena Cir **AMBR** Wellington, FL 33414 TRUST □ Remove ☐ Change 3607 Siena Cir STACY DENMAN MGR Wellington, FL 33414 ■ Add ☐ Remove □ Change JEFFREY M. DRAZAN 2012 **AMBR EXEMPT TRUST** 3607 Siena Cir Wellington, FL 33414 **■** Remove □ Change DRAZAN FAMILY 1996 TRUST AMBR □ Add 3607 Siena Cir Wellington, FL 33414 ■ Remove □ Change JEFFREY M. DRAZAN MGR □ Add 3607 Siena Cir Wellington, FL 33414 Remove ☐ Change □ Add ☐ Remove

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f an effec <u>Note:</u> 1: documer	re date, if other than the date of filing: tive date is fisted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed in the date on the Department of State's records.	as th
ne reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.	of:
Dated :	10/31/18	
	Horiland	
	Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00