# 15000202065

(Requestor's Name)
(Address)
(Hadioso)
(Address)
(City/State/Zip/Phone #)
(Only/State/Zip/i Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(business Entity Name)
•
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
operation of thing officers
·

Office Use Only



600296394026

03/22/17--01013--017 \*\*30.00

MAR 23 2017 S. YOUNG COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT:	, , , , , ,	LLC ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	<u> </u>	una Gavin Foste		
	/	MSJ3 LLC Firm/Company		
		50 Atlanta Plaz Address	ea Dr	، المعالم الم
	Ja	nibel FL. 33957 City/State and Zip Code		SECRETARSE ALLAHAR 22
	Cana (E-mail address: (	g foster@gmail.  be used for future annual report notifi	cation)	RAYCOT SEEE.
For further information co	oncerning this matter, please ca	ıll:		AH 10: 48
Dank Name of	Gavin Foste	at (305) 509. Area Code Daytime	9274 Telephone Number	<b>6</b>
Enclosed is a check for th	, -			
□ \$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 enclo	

## 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

M8J3, LLC			
(Name of the Limit	ed Liability Company as it nov (A Florida Limited Liability Co	w appears on our records.) mpany)	
The Articles of Organization for this Limited Li Florida document number <u>L15000202065</u>	ability Company were filed	d on December 03,2015	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited liability comp	pany here:	
The new name must be distinguishable and contain the w		y," the designation "LLC" or the abbrev	viation "L.L.C."
Enter new principal offices address, if applic	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		<b>3</b> 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)			2 AM 10: 48
B. If amending the registered agent and/ registered agent and/or the new registered of	~	ress on our records, enter the	name of the new
Name of New Registered Agent:	Dana Gavin Foster		<del></del>
New Registered Office Address:	1750 Atlanta Plaza Dr		
	E	nter Florida street address	
•	Sanibel	, Florida <sup>33957</sup>	
	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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			□ Change
			Add
			Change 57
			□ A B H A
			MAR 22 Remark 10:48
			Remove 71
			□ Remove
			☐ Change
			□ Add
		<del></del>	☐ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change

			<del></del>
<del></del>	<del></del>		
	Marian Company of the		**************************************
<del> </del>	<del></del>		<del></del>
<u> </u>			
			<b>≒</b>
			<u> </u>
			~ 22
			•
			AM IO:
			<del>.</del>
		4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
n effective date in offective date. If the date	other than the date of filing: listed, the date must be specific and cannot be prior inserted in this block does not meet the applicative date on the Department of State's records	to date of filing or more than 90 days able statutory filing requirements	<b>optional)</b> s after filing.) Pursuant to 605.02 s, this date will not be listed a
	ifies a delayed effective date, but no after the record is filed.	ot an effective time, at 12:	01 a.m. on the earlier
ated	03.19.17	_·	
	/\		

Page 3 of 3

Filing Fee: \$25.00