L15000208945

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certificates of Status
Special Instructions to Filing Officer.
1:00 Rill
ip Please

Office Use Only



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MECEIVED

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AUG 0.3 2020 ALBRITTON

COVER LETTER

TO: Registration Section

Division of Corporations			
SUBJECT: 150	East Altono	inte LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	N atha	Name of Person	
Subject: 150 East Altamonte LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Mathan Bayon			
	And the second and fee(s) are submitted for filing. It correspondence concerning this matter to the following: Nathan Brown		
Subject: 1650 East Altanonte Luck Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:			
	8441 TV	Address	
	Tallahas	see F1 323	1>
		City/State and Zip Code	· a
	think bigge	er Construction	& Ghail-Com
			fication)
For further information c	oncerning this matter, please c	all:	
		at (
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
S25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			(doctrinia cip) is enciried)
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Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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or the abbreviation "L.L.C."
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ne name of the new register
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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 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
		 	□Add
			□Remove
		.	□Change
		· · · · · · · · · · · · · · · · · · ·	□Add
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Effective date, if other than the date of filing: [an effective 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 605.0207. [an effective date is listed, the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as locument's effective date on the Department of State's records. [are coord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the dis filed. [bated] July 3 1	_	·····
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