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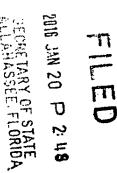
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COVER LETTER

то:	Registration Se Division of Cor						
CHDIE	A & J MAI						
SUBJECT: Name of Limited Liability Company							
			•				
The en	closed Articles of	Amendment and fec(s) are sub	mitted for filing.				
Please	return all correspo	ndence concerning this matter	to the following:				
		JOSHUA DURST					
			Name of Person				
		DURST & JORDAN CPA	PA				
			Firm/Company				
		4259-B HWY 90					
			Address				
		PACE FL 32571					
			City/State and Zip Code				
		STAFF@DURSTJORDAN E-mail address: (.COM to be used for future annual report notifi	cation)			
For furt	ther information co	oncerning this matter, please ca	all:				
JOSHU	JA C DURST CP	A	850 995-5000				
	Name o	f Person	at () Area Code Daytime	Telephone Number			
Enclose	ed is a check for th	e following amount:					
■ \$25	5.00 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

	OF	· 22 150
(Name of the Lim	MONGERONCE ited Liability Company as it now ap (A Florida Limited Liability Compa	ny)
The Articles of Organization for this Limited I Florida document number	Liability Company were filed or	12/30/15
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability compan	y here:
Enter new principal offices address, if appli (Principal office address MUST BE A STRE		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	(BOX)	***
B. If amending the registered agent and registered agent and/or the new registered of		on our records, enter the name of the new
Name of New Registered Agent:	DURST & JORDAN CPA PA	1
New Registered Office Address:	4259-B HWY 90	
		Florida street address
	PACE	, Florida 32571 Zw Code
	Cuy	Mp Char

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.

I Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>Títle</u>	<u>Name</u>	Address	Type of Action
AMBR	ANGELA BARNES	4766 WINTERDALE DR	
		PACE, FL 32571	
			Change
MGR	GERALD L BARNES	4766 WINTERDALE DR	□ Add
		PACE FL 32571	□ Remove
		<u> </u>	Change
			□ Add
			□ Remove
			☐ Change
			☐ Remove
			☐ Change
			□ Remove
		P. C.	Change
		FLOR	Si Ni Change

PL	EASE ADD FEDERAL ID# 81-0942012 TO THIS LLC			
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fan effec <u>Note:</u> If	e date, if other than the date of filing: (ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days the date inserted in this block does not meet the applicable statutory filing requirement it's effective date on the Department of State's records.		g.) Pursu	
	rd specifies a delayed effective date, but not an effective time, at 12: Oth day after the record is filed.	01 a.m.	on th	e earlier of
Dated	January 13 2016.		2016	
	COH	SA	W 9	
	Signature of a member or authorized representative of a member	TARY	N 20	
	Joshua C Durst CPA Typed or printed name of signee	ΕΕ. 10		m
	Typed or printed name of signee	13 30.	- U -	
)RI	2: 48	

Filing Fee: \$25.00