

2160000 11700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

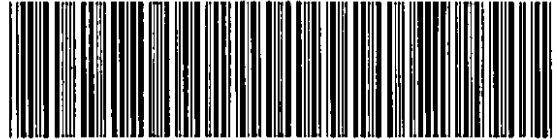
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 14 2019
S. YOUNG

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Willows Reef LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on Jan. 19, 2016 and assigned Florida document number L16000011700.

This amendment is submitted to amend the following:

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

Willow's Reef LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Daniel Chapman

1021 W 31st St. #2

Riviera Beach, FL 33404

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Robert Taylor

915 W Jefferson St.

Springfield, Ohio 45506

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Name of New Registered Agent: _____

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 = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CFO	Daniel Chapman		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		1021 W 31st St #2, Riviera Beach, FL 33404	<input checked="" type="checkbox"/> Change
CFO	Robert Taylor	915 W Jefferson St. , Springfield, Ohio 45506	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Marianne Chapman	1021 W31st St #2, Riviera Beach, FL 33404	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	James Scott Riley	119 Stover Rd., Mooresville, NC 28117	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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