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COVER LETTER

TO:

Registration Section

Divisio	on of Corp	orations		*
		national, LLC		
SUBJECT: _		Name of Lim	ited Liability Company	
The enclosed A	rticles of A	mendment and fee(s) are sub	mitted for filing.	
Please return al	l correspon	dence concerning this matter	to the following:	
		Zachary Eisner		
			Name of Person	
		Galbut Walters & Associate	tes	
			Firm/Company	
		4770 Biscayne Blvd, Suite	1400	SEOR F
			Address	
		Miami, FL 33137		200 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
			City/State and Zip Code	
		ZEisner@hudcap.com		ation) PA 4: 38
			to be used for future annual report notific	ation)
For further info	rmation cor	ncerning this matter, please ca	all:	
Zack Eisner			786 245-2319 at ()	
	Name of I	Person		Felephone Number
Enclosed is a cl	neck for the	following amount:		
□ \$25.00 Filid	ng 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)
	Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations 6327 see, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3236	ions er Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Telicon International		
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	oility Company were filed on February 4, 2016	and assigned
Florida document number L16000024481	· · · · · · · · · · · · · · · · · · ·	
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab		
(Principal office address MUST BE A STREET	ADDRESS)	
		产的の
		Ed A n
		表表 6 二
Enter new mailing address, if applicable:		7
(Mailing address MAY BE A POST OFFICE BO	OX)	
		HE W
D. If amonding the posistered agent and/our	. wasistawad office adduces on our records ant	5411 (b)
registered agent and/or the new registered office	registered office address on our records, <u>ent</u>	er the name of the ne-
registered agent and/or the new registered office	te address here.	
Name of New Registered Agent:		
New Registered Office Address:		
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>	Address	Type of Action
MGR	Crystal Anderson	4770 Biscayne Blvd, Suite 1080	_ ■ Add
		Miami, FL 33137	☐ Remove
			Change
MGR	Kadion Preston	4770 Biscayne Blvd, Suite 1080	_□ Add
		Miami, FL 33137	☐ Remove
		Change to AMBR	Change
MGR	Donovan E James	4770 Biscayne Blvd, Suite 1080	□ Add
		Miami, FL 33137	Remove
		Donovan L James	元 元 元 三 Change
			STEE BAdd D
			Remove
			☐ Change

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rective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to te: If the date inserted in this block does not meet the applical cument's effective date on the Department of State's records.	(optional) o date of filing or more than 90 days after filing.) Pursuant to 605.02 ble statutory filing requirements, this date will not be listed
record specifies a delayed effective date, but not The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier
red February 8th , 2016	
	rized representative of a member

Page 3 of 3

Filing Fee: \$25.00

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



Detail by Entity Name

Florida Limited Liability Company

TELICON INTERNATIONAL, LLC

Filing Information

Document Number

L16000024481

FEI/EIN Number

NONE

Date Filed

02/04/2016

State

FL

Status

ACTIVE

Principal Address

4770 BISCAYNE BLVD SUITE 1080 MIAMI, FL 33137

Mailing Address

4770 BISCAYNE BLVD SUITE 1080 MIAMI, FL 33137

Registered Agent Name & Address

EISNER, ZACHARY 4770 BISCAYNE BLVD SUITE 1400 MIAMI, FL 33137

Authorized Person(s) Detail

Name & Address

Title MGR

JAMES, DONOVAN E 4770 BISCAYNE BLVD SUITE 1080 MIAMI, FL 33137

Title MGR

CAMPBELL, DAVE G 4770 BISCAYNE BLVD SUITE 1080 MIAMI. FL 33137

Title MGR

STORETANIA SIAT

Detail by Entity Name

PRESTON, KADION 4770 BISCAYNE BLVD SUITE 1080 MIAMI, FL 33137

Annual Reports

No Annual Reports Filed

Document Images

02/04/2016 -- Florida Limited Liability

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