L16000031801

(Re	equestor's Name)	
. (Ad	ldress)	
(Ad	dress)	
 (Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



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ECRETARY OF STATE

S Warren JAN 1 0 2017



December 2, 2016

LYNETTE M. ANDERSON 5342 VIVERA LANE JACKSONVILLE, FL 32244

SUBJECT: L&A INTERNET ENTERPRISE LLC

Ref. Number: L16000031801

We have received your document for L&A INTERNET ENTERPRISE LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 016A00025734

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:	Registration Sec Division of Corp			
CUDIE		et Enterprise LLC		
SUBJE	LI:	Name of Limi	ted Liability Company	
The encl	losed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please re	eturn all correspor	ndence concerning this matter t	to the following:	
		Lynette M. Anderson		
			Name of Person	
			Firm/Company	<u> </u>
		5342 Vivera Lane		
			Address	
		Jacksonville, Florida 32244	4	
			City/State and Zip Code	
		llcsupport@primecorporates		
		E-mail address: (t	to be used for future annual report notific	ation)
For furtl	her information co	oncerning this matter, please ca	di:	
Lynette	M. Anderson		855 577-4639 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	e following amount:		
\$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 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

L&A Internet Enterprise LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company	were filed on February 15, 2016	and assigned
lorida document number L16000031801		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	oility company here:	
	1	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5342 Vivera Lane	
Principal office address MUST BE A STREET ADDRESS)	Jacksonville, Florida 32244	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	
B. If amending the registered agent and/or registered of	office address on our records, e	nter the name of the
registered agent and/or the new registered office address her		
Name of New Registered Agent:		
New Registered Office Address:		
The Registered Office Address.	Enter Florida street address	
	, Florid	la
	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

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 = M AMBR = A	lanager uthorized Member		
Title	<u>Name</u>	Address	Type of Action
			☐ Add
			□ Remove
			Change
			Add
			Remove
			☐ Change
			□ Add
			Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
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			☐ Change
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			PAT 42 Change

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ctive date, if other than the o	date of filing:be specific and cannot be prior to date of filing or π	(optional)
If the date inserted in this blo	ck does not meet the applicable statutory filin	ig requirements, this date will not be lis
iment's effective date on the De	partment of State's records.	
ecord specifies a delayed	effective date, but not an effective t	time, at 12:01 a.m. on the earl
	rd is filed.	and at 22.02 and an area
ne 90th day after the reco		
ne 90th day after the reco	2016	
ne 90th day after the reco	, 2016	
ne 90th day after the reco	2016 In Ander	
d November 21	2016 2016 2016 2016 Signature of a member or authorized representative	
d November 21	In anderso	Service Servic

Filing Fee: \$25.00