LIL 0000 37504

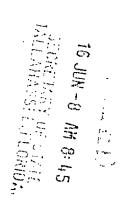
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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ACES-3, LLC

518 S. Industry Road, Suite B Cocoa, FL 32926 321-338-2477

June 3, 2016

Florida Department of State Attn: Registration Section

P.O. Box 6327

Tallahassee, FL 32314 RE: L16000033504

To Whom it May Concern;

Please review the attached forms regarding an amendment to our original paperwork.

I can be reached at 321-338-2477 and our return address is:

Aces-3, LLC P.O. Box 236485 Cocoa, FL 32926

Thank you for your time and please contact me if you have any questions or require any additional information.

Best regards,

Kelly Suilivan

Administration, ACES-3, LLC

COVER LETTER

Div	ision of Corp	porations		
SUBJECT:	ACES-3, LI	LC.	•	
SCHOLET.		Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. Il correspondence concerning this matter to the following: Vincent A. Flanagan Name of Person ACES-3, LLC Firm/Company PO BOX 236485 Address Cocoa, FL City/State and Zip Code vince.aces3@gmail.com E-mail address: (to be used for future annual report notification) ormation concerning this matter, please call: anagan Name of Person at (1) Area Code Daytime Telephone Number		
The enclosed	d Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Vincent A. Flanagan		
		···	Name of Person	
		ACES-3, LLC		
	Firm/Company			
		PO BOX 236485		
			Address	
		Cocoa, FL		
			City/State and Zip Code	
For further in	nformation co		•	cation)
Vincent A. I	Flanagan		321 652-1256	
. , ,	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	a check for the	e following amount:		
■ \$25.00 F	iling 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:

TO: . . Registration Section

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

ACES-3, LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I Florida document number L16000033504	Liability Company	were filed on 02/05/2016	and assigned
his amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	Ū	pility company here:	
N/Λ		smey company nove.	
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 appli	cable:	N/A	
Principal office address MUST BE A STREET ADDRESS)			·
Enter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE	E BOX)		
3. If amending the registered agent and registered agent and/or the new registered of	•		r the name of the
Name of New Registered Agent:	N/A		1000 mm
New Registered Office Address:	N/A		15 m
		Enter Florida street address	90 1
	N/A	, Florida _	5 5 S
		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
AMBR	Todd R. McDowell, Vice President	960 Bartlett Lane	□ Add
		Rockledge, FL 32955	■ Remove
			Change
MGR	Todd R. McDowell, Vice President	960 Bartlett Lane	∃ Add
		Rockledge, FL 32955	☐ Remove
			Change
AMBR	Brian P. Barnett, Vice President &	2065 Hwy A1A, Unit 1303	
		Indian Harbour Beach, FL 32937	■ Remove
			Change
MGR	Brian P. Barnett, Vice President &:	2065 Hwy A1A, Unit 1303	■ Add
		Indian Harbour Beach, FL 32937	□ Remove
			☐ Change
			Add
			□ Remove
		<u></u>	Change
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ective date, if other th	an the date of fil	N/A ling:			_ (optional)	
n effective date is listed, the te: If the date inserted in	date must be specific.	and cannot be pri	or to date of filin	g or more than 90 o	days after filing.) Pu	irsuant to 605.
cument's effective date of	n the Department c	of State's record	icable statutory	rinnig requirem	ents, this date wil	i ilot de liste
record specifies a d	elayed effective	e date, but r	ot an effect	ive time, at 1		the earlie
he 90th day after t	he record is file	ed.		•		
ted		_,				
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	/ dans	- Lle	Mary Mary Mary	ntative of a member		

Page 3 of 3

Filing Fee: \$25.00